| WATER WELL RECORD | | Form WWC-5 | | D | Division of Water Resources App. No. | | | |
|--|---|--------------------------|-------------------|--|--|--|----------------------|--|
| | | Fraction | | | Section Number Township No. Range Number | | | |
| County: Douglas | | NE% NE% NW% NE% | | - | 37 T 13 S R 3/ ₩ E □W | | | |
| Street/Rural Address | if unknown, distance | | | g System (GPS) i | | | | |
| from nearest town or | intersection: If at | owner's address, chec | ck here | | | | (in decimal degrees) | |
| 131 - N | 1100 0 | | U = | Long | | | (in decimal degrees) | |
| SCOP 2 14. | 1100 Koas | I Eudora, | 73 6602 | Datu | m | 84, □ NAD 83, □ | 1 NAD 27 | |
| | | | | | Collection Method: | | | |
| RR#, Street Address, Box #: 1810 N Prince Edward Island | | | | | GPS unit (Make/Model:) | | | |
| City, State, ZIP Code | | | 24000 | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m | | | | |
| 3 LOCATE WELL | Clary | Phoned | | Est. A | | | | |
| WITH AN "X" IN | 4 DEPTH OF | Plugged COMPLETED WEI | LL | 200 | ft | 5-200 | bores | |
| SECTION BOX: | Depth(s) Groun | dwater Encountered | (1) N A(1) | ب ft. | . (2) | ft. | (3) ft. | |
| N WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr | | | | | | | | |
| X | Pump test data: Well water wasft. after hours pumping gpm | | | | | | | |
| NW NE EST. YIELD. WAS gpm. Well water wasft. after hours pumping | | | | | | | | |
| W E Bore Hole Diameter | | | | | | | | |
| WELL WATER TO BE USED AS: Public water supply Geothermal Injection well | | | | | | | | |
| SW SE Domestic Feedlot Oil field water supply Dewatering Other (Specify below) | | | | | | | | |
| Irrigation Industrial Domestic-lawn & garden Monitoring well | | | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes No | | | | | | | | |
| S If yes, mo/day/yr sample was submitted | | | | | | | | |
| Water well districted: 1 163 2 140 | | | | | | | | |
| 5 TYPE OF CASING USED: Steel PVC Other H.D. Polyethyles. C CASING JOINTS: Glued Clamped Welded Threaded Fusion Casing diameter 3/4 in. to 200 ft., Diameter in. to ft., Diameter in. to ft. Casing height devoland surface 3/6 in., Weight SOR II. lbs./ft., Wall thickness or gauge No. 160 P57 | | | | | | | | |
| CASING JOINTS: U Glued U Clamped Welded U Threaded Fusion | | | | | | | | |
| Casing diameter | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: None | | | | | | | | |
| Steel Stainless Steel PVC Other (Specify) | | | | | | | | |
| Brass Galvanized Steel None used (open hole) | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: No. P | | | | | | | | |
| ☐ Continuous slot ☐ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole) | | | | | | | | |
| Louvered shutter Key punched Wire wrapped Saw cut Other (specify) SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft. | | | | | | | | |
| From | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | |
| From | | | | | | | | |
| 6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other | | | | | | | | |
| Grout Intervals: From | | | | | | | | |
| What is the nearest source of possible contamination: | | | | | | | | |
| Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below) | | | | | | | | |
| Sewer lines □ Cesspool □ Sewage lagoon □ Fuel storage □ Abandoned water well □ Watertight sewer lines □ Seepage pit □ Feedyard □ Fertilizer storage □ Oil well/gas well | | | | | | | | |
| Direction from well | | pit | | | rell | | •••••• | |
| FROM TO | LITHOLOG | GIC LOG | FROM | TO | | | JGGING INTERVALS | |
| | | 6-184 lime | 1110111 | | | <u> </u> | | |
| 16 27 500 | | 4-200 Shale | | | | | | |
| 27 32 lime | | 1 200 | | | | The state of the s | | |
| 32 48 San | dstane | | | | | | | |
| 48 54 lime | | | 200 | 3 | 5-200' | bores pluge | and with | |
| 54 70 sand | Stone | | | | Hich | | ntonite | |
| 70 85 Lim | | | | | 7 | | | |
| 85 114 Sha | | | | | | | | |
| 114 131 1im | | | | | | | | |
| 131 176 Sha | ie I | | | | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ★ constructed, □ reconstructed, or ▶ plugged | | | | | | | | |
| under my jurisdiction and was completed on (mo/day/year) .3 | | | | | | | | |
| Kansas Water Well Contractor's License No | | | | | | | | |
| under the business name of Eughs. Energy. Des. Inc., by (signature) INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies | | | | | | | | |
| INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. | | | | | | | | |
| Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at | | | | | | | | |
| http://www.kdheks.gov/waterwell/index.html. | | | | | | | | |
| KSA 82a-1212 | | | | | | | | |