

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:		Fraction <u>SE ¼ SE ¼ SE ¼</u>		Section Number <u>26</u>	Township Number <u>T 13 S</u>	Range Number <u>R 23 E</u>
County: <u>Johnson</u>		Distance and direction from nearest town or city street address of well if located within city? <u>200 Santa Fe Olathe, KS</u>		Global Positioning System (decimal degrees, min. of 4 digits)		
				Latitude: <u>N ° 38.88381</u>		
				Longitude: <u>W ° 94.81800</u>		
2 WATER WELL OWNER: <u>City of Olathe Public Works Dept.</u>		RR#, St. Address, Box # : <u>PO Box 768</u>		Elevation: <u>RIM: 1020.94; TOC: 1020.63</u>		
City, State, ZIP Code : <u>Olathe, KS, 66051-0768</u>				Datum: <u>above mean sea level</u>		
				Data Collection Method: <u>legal survey</u>		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>6.5</u> ft.				
		MW1				
		Depth(s) Groundwater Encountered <u>1</u> ft. <u>2</u> ft. <u>3</u> ft.				
		WELL'S STATIC WATER LEVEL <u>4.8</u> ft. below land surface measured on mo/day/yr <u>5/28/09</u>				
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm				
		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm				
		WELL WATER TO BE USED AS: <u>5</u> Public water supply <u>8</u> Air conditioning <u>11</u> Injection well				
		<u>1</u> Domestic <u>3</u> Feed lot <u>6</u> Oil field water supply <u>9</u> Dewatering <u>12</u> Other (Specify below)				
		<u>2</u> Irrigation <u>4</u> Industrial <u>7</u> Domestic (lawn & garden) <u>10</u> Monitoring well				
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr _____				
		Sample was submitted _____ Water Well Disinfected? Yes _____ No <u>X</u>				
5 TYPE OF CASING USED:						
<u>1</u> Steel		<u>3</u> RMP (SR)		<u>6</u> Asbestos-Cement		<u>9</u> Other (specify below)
<u>2</u> PVC		<u>4</u> ABS		<u>7</u> Fiberglass		
Blank casing diameter <u>2</u> in. to <u>3</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.						
Casing height below land surface <u>0.31</u> ft., Weight _____ lbs./ft. Wall thickness or gauge No. _____						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
<u>1</u> Steel		<u>3</u> Stainless steel		<u>5</u> Fiberglass		<u>7</u> PVC
<u>2</u> Brass		<u>4</u> Galvanized steel		<u>6</u> Concrete tile		<u>8</u> RM (SR)
						<u>9</u> ABS
						<u>11</u> Other (specify) _____
SCREEN OR PERFORATION OPENINGS ARE:						
<u>1</u> Continuous slot		<u>3</u> Mill slot		<u>5</u> Gauze wrapped		<u>7</u> Torch cut
<u>2</u> Louvered shutter		<u>4</u> Key punched		<u>6</u> Wire wrapped		<u>8</u> Saw Cut
						<u>9</u> Drilled holes
						<u>11</u> None (open hole)
SCREEN-PERFORATED INTERVALS:						
From <u>3.0</u> ft. to <u>6.5</u> ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS:						
From <u>2.0</u> ft. to <u>6.5</u> ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.
6 GROUT MATERIAL:						
<u>1</u> Neat cement		<u>2</u> Cement grout		<u>3</u> Bentonite		<u>4</u> Other <u>Concrete: 0-1 ft.</u>
Grout Intervals From <u>1</u> ft. to <u>2</u> ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.
What is the nearest source of possible contamination:						
<u>1</u> Septic tank		<u>4</u> Lateral lines		<u>7</u> Pit privy		<u>10</u> Livestock pens
<u>2</u> Sewer lines		<u>5</u> Cess pool		<u>8</u> Sewage lagoon		<u>11</u> Fuel storage
<u>3</u> Watertight sewer lines		<u>6</u> Seepage pit		<u>9</u> Feedyard		<u>12</u> Fertilizer storage
						<u>13</u> Insecticide Storage
						<u>14</u> Abandoned water well
						<u>16</u> Other (specify below)
Direction from well? <u>Within the source area</u>				How many feet? <u>0 feet</u>		
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>1</u>	<u>Fill Dirt; Brown silty clay with gravel, At 0.5', tan, medium grained sand</u>				
<u>1</u>	<u>5</u>	<u>Light brown clay, mottled gray, high plasticity, moist</u>				
<u>5</u>	<u>6.5</u>	<u>Light brown clay, mottled gray, high plasticity, moist</u>				
		<u>Auger refusal at 6.5 ft.</u>				
						<u>Flushmount waiver from BOW</u>
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, <u>(2)</u> reconstructed, or <u>(3)</u> plugged under my jurisdiction and was completed on (mo/day/year) <u>5/6/09</u> and this record is true to the best of my knowledge and belief.						
Kansas Water Well Contractor's License No. <u>757</u> . This Water Well Record was completed on (mo/day/year) <u>6/25/09</u> under the business name of <u>Larsen & Associates, Inc.</u> by (signature) _____						
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell .						