

WATER WELL RECORD Form WWC-5

☒ Original Record ☐ Correction ☐ Change in Well UseDivision of Water
Resources App. No.

Well ID

1 LOCATION OF WATER WELL: County: <u>WABASH CO</u> Fraction: <u>NW 1/4 NE 1/4 NW 1/4</u> 1/4 Section Number: <u>19</u> Township Number: <u>T 14 S</u> Range Number: <u>R 20 E</u> <input checked="" type="checkbox"/> E <input type="checkbox"/> W													
2 WELL OWNER: Last Name: <u>Zimmerman</u> First: <u>Rodger</u> Business: <u>32790 Northrock Creek Rd.</u> Address: <u>ALTA VISTA</u> State: <u>KS</u> ZIP: <u>66834</u> City: <u>ALTA VISTA</u> Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: <input type="checkbox"/> <u>From Northrock Creek Rd & D Road</u> <u>Go 1/2 mile East 300' South</u>													
3 LOCATE WELL WITH "X" IN SECTION BOX: N <table border="1"><tr><td></td><td></td><td></td></tr><tr><td>X</td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></table> W E S 1 mile				X									4 DEPTH OF COMPLETED WELL: <u>100</u> ft. Depth(s) Groundwater Encountered: 1) <u>45</u> ft. 2) ft. 3) ft. or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: <u>75.4</u> ft. <u>4/11/2025</u> <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) <input type="checkbox"/> above land surface, measured on (mo-day-yr) Pump test data: Well water was ft. after hours pumping gpm Well water was ft. after hours pumping gpm Estimated Yield: <u>8</u> gpm Bore Hole Diameter: <u>8</u> in. to <u>100'</u> ft. and in. to ft.
X													
5 Latitude: <u>N 38° 49.525</u> (decimal degrees) Longitude: <u>W 096° 20.746</u> (decimal degrees) Horizontal Datum: <input checked="" type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 Source for Latitude/Longitude: <input checked="" type="checkbox"/> GPS (unit make/model: <u>Garmin E Trex 20</u>) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper:													
6 Elevation: <u>1494'</u> ft. <input checked="" type="checkbox"/> Ground Level <input type="checkbox"/> TOC Source: <input type="checkbox"/> Land Survey <input checked="" type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other													
7 WELL WATER TO BE USED AS: 1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input checked="" type="checkbox"/> Livestock 2. <input type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial 5. <input type="checkbox"/> Public Water Supply: well ID 6. <input type="checkbox"/> Dewatering: how many wells? 7. <input type="checkbox"/> Aquifer Recharge: well ID 8. <input type="checkbox"/> Monitoring: well ID 9. Environmental Remediation: well ID <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection 10. <input type="checkbox"/> Oil Field Water Supply: lease 11. Test Hole: well ID <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify):													
Was a chemical/bacteriological sample submitted to KDHE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, date sample was submitted:													
Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No													
8 TYPE OF CASING USED: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other CASING JOINTS: <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded Casing diameter <u>5"</u> in. to <u>80'</u> ft. Diameter <u>2.1</u> in. to ft. Diameter in. to ft. Casing height above land surface <u>2.1</u> in. Weight <u>54 lb/40</u> lbs/ft. Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous Slot <input checked="" type="checkbox"/> Mill Slot <input type="checkbox"/> Gauze Wrapped <input type="checkbox"/> Torch Cut <input type="checkbox"/> Drilled Holes <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Louvered Shutter <input type="checkbox"/> Key Punched <input type="checkbox"/> Wire Wrapped <input type="checkbox"/> Saw Cut <input type="checkbox"/> None (Open Hole) SCREEN-PERFORATED INTERVALS: From <u>80</u> ft. to <u>100</u> ft. From ft. to ft. From ft. to ft. GRAVEL PACK INTERVALS: From <u>30</u> ft. to <u>100</u> ft. From ft. to ft. From ft. to ft.													
9 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other Grout Intervals: From <u>3'</u> ft. to <u>80</u> ft. From ft. to ft. From ft. to ft. Nearest source of possible contamination: <u>None Close</u> <input type="checkbox"/> Septic Tank <input type="checkbox"/> Lateral Lines <input type="checkbox"/> Pit Privy <input type="checkbox"/> Livestock Pens <input type="checkbox"/> Insecticide Storage <input type="checkbox"/> Sewer Lines <input type="checkbox"/> Cess Pool <input type="checkbox"/> Sewage Lagoon <input type="checkbox"/> Fuel Storage <input type="checkbox"/> Abandoned Water Well <input type="checkbox"/> Watertight Sewer Lines <input type="checkbox"/> Seepage Pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer Storage <input type="checkbox"/> Oil Well/Gas Well <input type="checkbox"/> Other (Specify) Direction from well? Distance from well? ft.													
10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS								
0	1	Top Soil											
1	6	Brown Clay											
6	13	Limestone											
13	45	Grey Shale											
45	56	Limestone (Water)											
56	78	Brown Shale											
78	86	Limestone											
86	100	Grey Silty Shale											
			Notes:										
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo-day-year) <u>4/11/2025</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>451</u> This Water Well Record was completed on (mo-day-year) <u>4/11/2025</u> under the business name of <u>Haldeman Well Drilling</u> <u>Craig H. Haldeman</u> Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212													

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MAY 16 2025

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