# WATER WELL RECORD Form WWC-5

☑ Original Record ☐ Correction ☐ Change in Well Use

Division of Water Resources App. No. ____ Well ID ____

**1 LOCATION OF WATER WELL:** County: Johnson | Fraction: NE ¼ SE ¼ NW ¼ NW ¼ | Section Number: 6 | Township Number: T 14 S | Range Number: R 23 ☑ E ☐ W

**2 WELL OWNER:** Last Name: Ling First: Paul
Business:
Address: 27565 W 143rd St
Address:
City: Olathe State: KS ZIP: 66061

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: ☑

**3 LOCATE WELL WITH "X" IN SECTION BOX:**

N
- - NW - - (X) | - - NE - -
W | E
- - SW - - | - - SE - -
S
|----------1 mile---------|

**4 DEPTH OF COMPLETED WELL:** ….200…. ft.
Depth(s) Groundwater Encountered: 1) …….…..…. ft.
2) …….. ft. 3) …….. ft., or 4) ☑ Dry Well
WELL'S STATIC WATER LEVEL: ……..…… ft.
☐ below land surface, measured on (mo-day-yr)…..…..…..
☐ 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: ……...gpm
Bore Hole Diameter: …..6….. in. to ..…200… ft. and
…… in. to ……. ft.

**5 Latitude:** ……38.867364…….(decimal degrees)
**Longitude:** ……-94.904634……..…(decimal degrees)
Datum: ☑ WGS 84 ☐ NAD 83 ☐ NAD 27
Source for Latitude/Longitude:
☐ GPS (unit make/model: ……..……...…...)
(WAAS enabled? ☐ Yes ☐ No)
☐ Land Survey ☐ Topographic Map
☐ Online Mapper: ……..……...

**6 Elevation:** ...…..……ft. ☐ Ground Level ☐ TOC
Source: ☐ Land Survey ☐ GPS ☐ Topographic Map
☐ Other …..…….…….

**7 WELL WATER TO BE USED AS:**

1. Domestic:
   ☐ Household
   ☐ Lawn & Garden
   ☐ Livestock
2. ☐ Irrigation
3. ☐ Feedlot
4. ☐ Industrial
5. ☐ Public Water Supply: well ID .....
6. ☐ Dewatering: how many wells? .....
7. ☐ Aquifer Recharge: well ID …….....
8. ☐ Monitoring: well ID ……..…..…..……
9. Environmental Remediation: well ID …….....
   ☐ Air Sparge ☐ Soil Vapor Extraction
   ☐ Recovery ☐ Injection
10. ☐ Oil Field Water Supply: lease ……..……..……
11. Test Hole: well ID …….
    ☐ Cased ☐ Uncased ☐ Geotechnical
12. Geothermal: how many bores? .....7.....
    a) Closed Loop ☐ Horizontal ☑ Vertical
    b) Open Loop ☐ Surface Discharge ☐ Inj. of Water
13. ☐ Other (specify): ……..……..

**Was a chemical/bacteriological sample submitted to KDHE?** ☐ Yes ☑ No If yes, date sample was submitted: …..…….…….....
Water well disinfected? ☐ Yes ☑ No

**8 TYPE OF CASING USED:** ☐ Steel ☐ PVC ☑ Other HDPE…….. CASING JOINTS: ☐ Glued ☐ Clamped ☑ Welded ☐ Threaded
Casing diameter ……75…..... in. to …..200….. ft., Diameter …….. in. to …..…….. ft., Diameter ……..….. in. to …..…….. ft.
Casing height above land surface ……48…… in. Weight ……..…… lbs./ft. Wall thickness or gauge No. SDR11……

TYPE OF SCREEN OR PERFORATION MATERIAL:
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify) ……..…….……..
☐ Brass ☐ Galvanized Steel ☑ None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) …….……
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☑ None (Open Hole)

SCREEN-PERFORATED INTERVALS: From ……..…. ft. to ……..…. ft., From ……..…. ft. to ……..…. ft., From ……..…. ft. to ……..…. ft.
GRAVEL PACK INTERVALS: From ……..…. ft. to ……..…. ft., From ……..…. ft. to ……..…. ft., From ……..…. ft. to ……..…. ft.

**9 GROUT MATERIAL:** ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other ……..
Grout Intervals: From ……0…… ft. to …200…… ft., From ……..…. ft. to ……..…. ft., From ……..…. ft. to ……..…. ft.

**Nearest source of possible contamination:** ☐ No potential source of contamination within 200 ft.
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well
☑ Other (Specify) house……...
Direction from well? …west…… Distance from well? …32…… ft.

| 10 FROM | TO | LITHOLOGIC LOG | FROM | TO | LITHO. LOG (cont.) or PLUGGING INTERVALS |
|---|---|---|---|---|---|
| 0 | 9 | brown clay | 80 | 90 | gray sandy shale |
| 9 | 14 | alt LS & shale | 90 | 153 | LS |
| 14 | 28 | LS | 153 | 200 | gray shale |
| 28 | 36 | gray shale | | | |
| 36 | 53 | sandstone | | | |
| 53 | 66 | LS | | | |
| 66 | 72 | gray shale | Notes: | | |
| 72 | 75 | red shale | | | |
| 75 | 80 | gray shale | | | |

**11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was ☑ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo-day-year) …1/11/2022……. and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. …760…..…… This Water Well Record was completed on (mo-day-year) …1/11/2022…..…… under the business name of Associated Drilling, Inc. ……...

Send one copy to WATER WELL OWNER and retain one for your records. Fee of $5.00 for each constructed well.
KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212