WATER WELL RECORD Form WWC-5 Division of Water								
☐ Original Record ☐ Correction ☐ Change in Well Use Resources App. No. Well ID Well ID								
1 LOCATION OF WATER WELL:			Fraction					
County: FRANKLIN								
2 WELL OWNER: Last Name: SMITH Business: Street or Rural Address where well is located (if unknown, distance direction from nearest town or intersection): If at owner's address, check his								
Address:		NO ROAD						
Address: 14					1463 SHAWNEE ROAD, POMONA, KS 66076			
City: OTTAWA State: KS ZIP: 66071					1			
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:187 ft.						. 38.6960	09 (decimal degrees	
	ON BOX:	Depth(s) Groundwater	Encountered: 1)1	10 ft.	Longitude:95.382225(decimal degrees)			
1	N	2) ft.	3) ft., or 4)[Dry Well			4 □ NAD 83 □ NAD 2	
	1 7 7		WELL'S STATIC WATER LEVEL: 1.10			r Latitude/Longitude		
NW.	NE		above land surface, measured on (mo-day-yr).			(unit make/model: (WAAS enabled?		
1 1		Pump test data: Well water was ft.			☐ Land Survey ☐ Topographic Map ☐ Online Mapper: WGS84			
W		after hours pumping gpm						
sw	SE	Well water was ft. after hours pumping gpm						
	x	Estimated Yield:1	gpiii	6 Elevation:ft. ☐ Ground Level ☐ TOC				
S		Bore Hole Diameter: .	ft. and	Source: Land Survey GPS Topographic Map				
	mile		in. to			Other		
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID								
1. Domestic: Household				10. Oil Field Water Supply: lease				
☐ Lawn & Garden		6. ☐ Dewateri 7. ☐ Aquifer I		11. Test Hole: well ID				
Livest		8. Monitori		12. Geothermal: how many bores?				
2. Irrigat	ion		9. Environmental Remediation: well ID			a) Closed Loop		
3. Feedle		Air Sparg	Extraction	b) Open Loop Surface Discharge Inj. of Water				
4. Industrial Recovery Injection 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 CASING JOINTS: Glued Clamped Welded Threaded								
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 24 in. Weight lbs/ft. Wall thickness or gauge No. 200PSI								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)								
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)								
SCREEN OR PERFORATION OPENINGS ARE:								
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)								
SCREEN-PERFORATED INTERVALS: From187 ft. to ft., From ft., From ft., From ft.								
GRAVEL PACK INTERVALS: From 187 ft. to 30 ft., From ft. to ft., From ft. to ft.								
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ■ Bentonite ☐ Other								
Grout Intervals: From								
Nearest source of possible contamination:								
☐ 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)								
Direction from well?								
10 FROM	TO	LITHOLO		FROM	TO LI	THO. LOG (cont.) or	PLUGGING INTERVAL	
0			7 SANDSTONE			' 		
9			21 LIMEY SAND	1		4048		
21			86 SANDSTONE					
23		SHALE 186-18	37 LIME	+				
24		LIME	/	1				
25		SHALE		Notes:				
87 89 SANDSTONE				110163.				
89 90 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) .9/19/2018 and this record is true to the best of my knowledge and belief.								
Kansas Water Well Contractor's License No. 561 This Water Well Record was completed on (mo-day-year) 9/19/2018								
under the t	l white conv al	ong with a fee of \$5 00 for ea	ch constructed well to: Ka	nsas Department	of Health and Fry	ironment. Bureau of W	ater, GWTS Section	
Mail I 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.								
1	Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015							