

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Douglas		Fraction NE ¼ SW ¼ SE ¼	Section Number 14	Township Number T 15 S	Range Number R 20E E/W				
Distance and direction from nearest town or city street address of well if located within city? 1½ miles East and 1½ miles south of Baldwin			Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____						
2 WATER WELL OWNER: Noah Mann RR#, St. Address, Box # : 49E 1900 Rd City, State, ZIP Code : Baldwin, Ks. 66006									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;">N <table border="1" style="margin: 10px auto; width: 100px; height: 100px;"> <tr> <td style="text-align: center;">NW</td> <td style="text-align: center;">NE</td> </tr> <tr> <td style="text-align: center;">SW</td> <td style="text-align: center;">SE X</td> </tr> </table> S</div>		NW	NE	SW	SE X	4 DEPTH OF COMPLETED WELL 72 ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL 22 ft. below land surface measured on mo/day/yr. 4-4-07 Pump test data: Well water was.....ft. after..... hours pumping..... gpm Est. Yield 20 gpm: Well water was.....ft. after..... hours pumping..... gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes X No			
NW	NE								
SW	SE X								
5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) 2 PVC 4 ABS 7 Fiberglass Blank casing diameter in. to ft. Diameter..... in. to ft. Diameter in. to ft. Casing height above land surface 24 in. Weight 2.82 lbs./ft. Wall thickness or gauge No. 258		CASING JOINTS: Glued X Clamped..... Welded..... Threaded.....							
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass <u>7 PVC</u> 9 ABS 11 Other (Specify) 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 <u>Saw Cut</u> 10 Other (specify)									
SCREEN-PERFORATED INTERVALS: From 22 ft. to 50 ft. From ft. to ft. From ft. to ft. From ft. to ft.									
GRAVEL PACK INTERVALS: From 22 ft. to 72 ft. From ft. to ft. From ft. to ft. From ft. to ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other Grout Intervals: From 0 ft. to 22 ft. From ft. to ft. From ft. to ft.									
What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well house 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well 75									
Direction from well? east		How many feet? 75							
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS				
0	3	top soil							
3	5	tan clay							
5	11	yellow shale							
11	23	tan shale							
23	32	grey sandstone							
32	37	tan sandstone							
37	50	grey sandstone							
50	53	grey limestone							
53	72	grey shale							
72		grey limestone							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 4-4-07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 182 This Water Well Record was completed on (mo/day/year) 4-23-07 under the business name of Strader Drilling Co., Inc. by (signature) <i>Betty Strader</i>									
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline 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 <u>constructed</u> well. Visit us at http://www.kdhe.state.ks.us/geo/waterwells .									