

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:		Fraction	Section Number		Township Number	Range Number																																																																								
County: Johnson	SE ¼ NE ¼ SE ¼	14	T 15 S R 23 E																																																																											
Distance and direction from nearest town or city street address of well if located within city? 103 S. Main, Spring Hill, KS			Global Positioning System (decimal degrees, min. of 4 digits)																																																																											
2 WATER WELL OWNER: Spring Hill Oil Co. Inc. RR#, St. Address, Box # : PO Box 479 City, State, ZIP Code : Spring Hill, KS 66083			Latitude: 38.74336°																																																																											
			Longitude: 94.81748°																																																																											
			Elevation: RIM: 990.86; TOC: 990.60																																																																											
			Datum: NAVD88																																																																											
Data Collection Method: legal survey																																																																														
3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 14.92 ft.																																																																												
		MW7																																																																												
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.																																																																												
		WELL'S STATIC WATER LEVEL 12.22 ft. below land surface measured on mo/day/yr 8/8/13																																																																												
		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: 5 Public water supply 8 Air conditioning 11 Injection well																																																																												
		1 Domestic 3 Feed lot 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/yrs _____																																																																												
		Sample was submitted _____ Water Well Disinfected? Yes _____ No X																																																																												
5 TYPE OF CASING USED:																																																																														
1 Steel		3 RMP (SR)		6 Asbestos-Cement		9 Other (specify below)																																																																								
(2) PVC		4 ABS		7 Fiberglass		CASING JOINTS: Glued _____ Clamped _____ Welded _____ Threaded X																																																																								
Blank casing diameter 2 in. to 4.92 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		Casing height below land surface 0.26 ft., Weight _____ lbs./ft. Wall thickness or gauge No. _____																																																																												
TYPE OF SCREEN OR PERFORATION MATERIAL:																																																																														
1 Steel		3 Stainless steel		5 Fiberglass		(7) PVC																																																																								
2 Brass		4 Galvanized steel		6 Concrete tile		8 RM (SR)																																																																								
						9 ABS																																																																								
						11 Other (specify) _____																																																																								
						12 None used (open hole)																																																																								
SCREEN OR PERFORATION OPENINGS ARE:																																																																														
1 Continuous slot		(3) Mill slot		5 Gauze wrapped		7 Torch cut																																																																								
2 Louvered shutter		4 Key punched		6 Wire wrapped		8 Saw Cut																																																																								
						9 Drilled holes																																																																								
						11 None (open hole)																																																																								
						10 Other (specify) _____																																																																								
SCREEN-PERFORATED INTERVALS:																																																																														
From 4.92 ft. to 14.92 ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.																																																																								
GRAVEL PACK INTERVALS:		From 3 ft. to 15.23 ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.																																																																								
						From _____ ft. to _____ ft.																																																																								
6 GROUT MATERIAL:																																																																														
1 Neat cement		2 Cement grout		(3) Bentonite		(4) Other Concrete: 0-1 ft																																																																								
Grout Intervals From 1 ft. to 3 ft.		From _____ ft. to _____ 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																																																																								
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage																																																																								
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		13 Insecticide Storage																																																																								
						14 Abandoned water well																																																																								
						16 Other (specify below) _____																																																																								
Direction from well? N-NW						How many feet? 65 ft																																																																								
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>0.5</td> <td>Asphalt/concrete</td> <td></td> <td></td> <td></td> </tr> <tr> <td>0.5</td> <td>6</td> <td>Black silty clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>6</td> <td>10</td> <td>Fill material</td> <td></td> <td></td> <td></td> </tr> <tr> <td>10</td> <td>14.5</td> <td>Brown silty clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>14.5</td> <td>15.23</td> <td>Limestone</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>							FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	0.5	Asphalt/concrete				0.5	6	Black silty clay				6	10	Fill material				10	14.5	Brown silty clay				14.5	15.23	Limestone																																							
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 7/24/13 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 757 . This Water Well Record was completed on (mo/day/year) 8/13/13 under the business name of Larsen & Associates, Inc. by (signature) _____ Flushmount waiver from BOW																																																																														
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.																																																																														