

**WATER WELL RECORD Form WWC-5**

Division of Water Resources App. No.  

Well ID  

Original Record  Correction  Change in Well Use

<b>1 LOCATION OF WATER WELL:</b> County: Miami	Fraction NE ¼ SE ¼ NE ¼ SE ¼	Section Number 31	Township Number T 15 S	Range Number R 24 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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**2 WELL OWNER:** Last Name: Edwards First: Jim  
 Business: \_\_\_\_\_  
 Address: 1015 S Cedar Hills Drive  
 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:   
 23644 S Renner Rd  
 Spring Hill, KS 66083

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

-- NW --	-- 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: 5.625 in. to 200 ft. and  
 ..... in. to ..... ft.

**5 Latitude:** ..... 38.699509 ..... (decimal degrees)  
**Longitude:** ..... -94.779946 ..... (decimal degrees)  
 Horizontal 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:** 1058 ..... ft.  Ground Level  TOC  
 Source:  Land Survey  GPS  Topographic Map  
 Other KOLAR .....

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

1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock	5. <input type="checkbox"/> Public Water Supply: well ID .....	10. <input type="checkbox"/> Oil Field Water Supply: lease .....
2. <input type="checkbox"/> Irrigation	6. <input type="checkbox"/> Dewatering: how many wells? .....	11. Test Hole: well ID .....
3. <input type="checkbox"/> Feedlot	7. <input type="checkbox"/> Aquifer Recharge: well ID .....	<input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical
4. <input type="checkbox"/> Industrial	8. <input type="checkbox"/> Monitoring: well ID .....	12. Geothermal: how many bores? ..... 3 .....
	9. Environmental Remediation: well ID .....	a) Closed Loop <input type="checkbox"/> Horizontal <input checked="" type="checkbox"/> Vertical
	<input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction	b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water
	<input type="checkbox"/> Recovery <input type="checkbox"/> Injection	13. <input type="checkbox"/> 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 ..... 0.75 in. to 200 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
 Casing height above land surface ..... 36 in. Weight ..... lbs./ft. Wall thickness or gauge No. ....  
 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) .....  
 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 ..... 200 ft. to 0 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**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? ..... Distance from well? ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	4	Soil & Clay	131	148	Shale 197-200 Shale
4	16	Broken Lime	148	156	Lime
16	53	Lime	156	163	Shale
53	55	Shale	163	169	Sand
55	58	Lime	169	192	Shale
58	67	Shale	192	197	Lime
67	109	Lime	<b>Notes:</b>		
109	113	Shale			
113	131	Lime			

**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) 03/23/2021..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 953..... This Water Well Record was completed on (mo-day-year) 03/29/2021..... under the business name of Allen's Holdings & Investments dba EED..... Signature: \_\_\_\_\_