

WATER WELL RECORD Form WWC-5

☒ Original Record ☐ Correction ☐ Change in Well Use

Division of Water
Resources App. No.

Well ID MW-1D

1 LOCATION OF WATER WELL:

County: Lyon

Fraction

SW 1/4 NE 1/4 SE 1/4 1/4

Section Number

4

Township Number

T 16 S

Range Number

R 10 E W

2 WELL OWNER: Last Name:

First:

Business: Corps of Engineers

Address: 601 E 12th Street

Address:

City: Kansas City

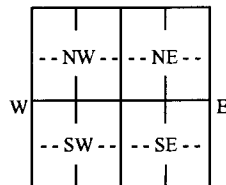
State: MO ZIP: 64106

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: ☐

1/2 mi NW of RD 360th & RD D

3 LOCATE WELL WITH "X" IN SECTION BOX:

N



W S E
|-----1 mile-----|

4 DEPTH OF COMPLETED WELL: 65 ft.

Depth(s) Groundwater Encountered: 1) ft.

2) ft. 3) ft. or 4) ☐ Dry Well

WELL'S STATIC WATER LEVEL: 46.2 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: 7 in. to 70 ft. and

in. to ft.

5 Latitude: N 38.68727 (decimal degrees)

Longitude: W096.30307 (decimal degrees)

Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27

Source for Latitude/Longitude:

☒ GPS (unit make/model: Garmin)

(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?

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

Casing diameter 2 in. to ft., Diameter in. to ft., Diameter in. to ft.

Casing height above land surface 36 in. Weight lbs./ft. Wall thickness or gauge No. sch 40

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 60 ft. to 65 ft., From ft. to ft., From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From 56 ft. to 67 ft., From ft. to ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other

Grout Intervals: From 1 ft. to 56 ft., From ft. to 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) concrete bunker

Direction from well? Distance from well? ft.

10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS

0	5	gray clay			
5	9	limestone			
9	24	yellow/gray shale			
24	34	limestone			
34	50	grayish shale			
50	65	limestone			
65	70	gray shale			

Notes:

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) 5/13/15 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 90-2 This Water Well Record was completed on (mo-day-year) 6/23/15 under the business name of Traut Wells

Mail 1 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.

Visit us at <http://www.kdheks.gov/waterwell/index.html>

KSA 82a-1212

Revised 1/20/2015