

**WATER WELL RECORD Form WWC-5**

Division of Water Resources App. No.

Well ID

Original Record  Correction  Change in Well Use

**1 LOCATION OF WATER WELL:** County: Osage Fraction SE 1/4 NE 1/4 SE 1/4 SW 1/4 Section Number 30 Township Number T 16 S Range Number R 16 E

**2 WELL OWNER:** Last Name: Anstaett First: Melinda 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:   
 Business: \_\_\_\_\_ Address: \_\_\_\_\_  
 Address: 24379 S US HWY 75  
 City: Lyndon State: KS ZIP: 66451

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

N

NW	NE
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:** 38.6252 (decimal degrees)  
**Longitude:** -95.6851 (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:** 1086 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 _____ 6. <input type="checkbox"/> Dewatering: how many wells? _____ 7. <input type="checkbox"/> Aquifer Recharge: well ID _____ 8. <input type="checkbox"/> Monitoring: well ID _____	10. <input type="checkbox"/> Oil Field Water Supply: lease _____ 11. Test Hole: well ID _____ <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? <u>3</u> a) Closed Loop <input type="checkbox"/> Horizontal <input checked="" type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water
2. <input type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial	9. Environmental Remediation: well ID _____ <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <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 H.D.P.E. 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 below 36 in. Weight SDR11 lbs./ft. Wall thickness or gauge No. 160PSI

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	5	SOIL & CLAY	78	81	SHALE 135-140 SHALE
5	8	BROKEN LIME	81	86	LIME 140-155 LIME
8	11	LIME	86	97	SHALE 155-181 SHALE
11	16	SHALE	97	114	LIME 181-191 LIME
16	18	LIME	114	127	SHALE 191-200 SHALE
18	26	SHALE	127	135	LIME
26	44	LIME	Notes:		
44	76	SHALE			
76	78	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) 06/26/2019 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) 06/27/2019 under the business name of Allen's Holdings & Investments d/b/a EED! Signature \_\_\_\_\_

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.