

**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources; App. No.  

<b>1 LOCATION OF WATER WELL:</b> County: <u>Miami</u>	Fraction <u>NE 1/4 NE 1/4 NE 1/4</u>	Section Number <u>3</u>	Township Number T <u>18</u> S	Range Number R <u>23</u> EW
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Distance and direction from nearest town or city street address of well if located within city? 33580 Columbus Rd Paola, KS.

**Global Positioning Systems** (decimal degrees, min. of 4 digits)  
 Latitude: \_\_\_\_\_  
 Longitude: \_\_\_\_\_  
 Elevation: \_\_\_\_\_  
 Datum: \_\_\_\_\_  
 Data Collection Method: \_\_\_\_\_

**2 WATER WELL OWNER:** James and Viola Lee  
 RR#, St. Address, Box # : 33580 Columbus Rd  
 City, State, ZIP Code : Paola, KS. 66271

**3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:**

N																						
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**4 DEPTH OF COMPLETED WELL** 180 ft. 4-180' Bores Plugged

Depth(s) Groundwater Encountered (1) None ft. (2) \_\_\_\_\_ ft. (3) \_\_\_\_\_ ft.  
 WELL'S STATIC WATER LEVEL None ft. below land surface measured on mo/day/yr. \_\_\_\_\_  
 Pump test data: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Est. Yield None 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 Closed loop Heat pump

Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_\_\_ No X \_\_\_\_\_; If yes, mo/day/yr  
 Sample was submitted. \_\_\_\_\_ Water well disinfected? Yes \_\_\_\_\_ No X \_\_\_\_\_

**5 TYPE OF CASING USED:**

1 Steel	3 RMP (SR)	6 Asbestos-Cement	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
2 PVC	4 ABS	7 Fiberglass	9 Other (specify below)	Welded <u>Fusion</u>
				Threaded _____

Blank casing diameter 3/4 in. to 180 ft., Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft., Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface 36 in., Weight SOR 11 lbs./ft. Wall thickness or gauge No. \_\_\_\_\_

TYPE OF SCREEN OR PERFORATION MATERIAL: None

1 Steel	3 Stainless Steel	5 Fiberglass	7 PVC	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 Saw cut	10 Other (specify) _____	

SCREEN-PERFORATED INTERVALS: From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., 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., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**6 GROUT MATERIAL:** 1 Neat cement 2 Cement grout 3 Bentonite 4 Other \_\_\_\_\_

Grout Intervals: From 180 ft. to 3 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination: NONE

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	
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	15 Oil well/gas well	

Direction from well? \_\_\_\_\_ How many feet? \_\_\_\_\_

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	16	Soil + clay			
16	27	lime			
27	37	Shale	180	3	High Solid Bentonite Grout
37	67	lime			
67	80	Shale			
80	95	lime			
95	99	Shale			
99	105	lime			
105	110	Shale			
110	114	lime			

**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) \_\_\_\_\_ and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 561. This Water Well Record was completed on (mo/day/year) 2-24-09 under the business name of Evans Energy Dev. Inc by (signature) [Signature]

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