WATER W	ELL R	ECORD	Forn	n WWC-	5 D	vision of W	ater Resc	ources; App. No.		
1 LOCATION OF WATER WELL:			Fraction	NIW I		Section N	umber	Township Number	r Range Number	
County: Coffey NE 1/2 NW 1/2 NW 1/2 20 T 19 S R 16 Distance and direction from nearest town or city street address of well if Global Positioning System (decimal degrees, min. of									egrees, min. of 4 digits)	
located within city? 1619 25 th Rd., Waverly KS Latitude: NA										
Longitude: NA										
2WATER WELL OWNER: McNabb RR#, St. Address, Box # : 1619 25 th Rd.						Elevation: NA Datum: NA				
City, State, ZIP Code : Waverly KS						Data Collection Method: legal survey				
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 150 ft.										
LOCATON										
WITH AN	"X" IN	Depth(s) Groun	dwater En	countered 1		NA	ft. 2	ft. :	3 ft.	
SECTION	BOX:	WELL'S STAT	TIC WATE	R LEVEL	NA	ft. below la	and surfa	ace measured on mo	o/day/yr	
N		Pump	test data:	Well water	r was	ft.	. after	hours pum	ping gpm	
X	1	Est. Yield	gpm:	Well water	r was	ft.	. after	hours pum	nping gpm	
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well										
W 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 2 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well Geothermal										
2 Irrigation 4 Industrial / Domestic (lawn & garden) 10 Monitoring well Geothermal										
SW—SE— Was a chamical/bacterial aginal comple submitted to Department? Ves No V: If yes mo/day/yrs										
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs										
S Sample was submitted Water Well Disinfected? Yes No X										
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped										
1 Steel	1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded Fusion									
2 PVC	2 PVC 4 ABS 7 Fiberglass Polyethylene Threaded									
1 Steel 3 RMP (SR) 6 Asbestos-Cement 2 PVC 4 ABS 7 Fiberglass Polyethylene Threaded Blank casing diameter 3/4 in. to 150 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 4 ft., Weight lbs./ft. Wall thickness or gauge No. 160 PSI										
Casing height below land surface 4 ft., Weight lbs./ft. Wall thickness or gauge No. 160 PSI TYPE OF SCREEN OR PERFORATION MATERIAL:										
LEYPE OF SUKEEN OK PERFORATION MATERIAL:										
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)										
ISCREEN OF DEDEOD ATION OPENINGS ARE:										
1 Continuous slot 3 Mill slot 5 Gauze 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.										
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										
SCREEN-I ER	TOKATE	D INTERVALS.	From		ft to		ft F1	rom ft	to ft	
GRAVEL PACK INTERVALS: From ft. to						ft. From ft. to ft.				
GIGAVI	LIACK	HVILK VALD.	From		ft to		ft. Ft	rom ft	t. 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 4 ft. to 150 ft. From ft. to ft. From ft. to ft.										
What is the percent source of perceible contemination:										
What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify)										
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below)										
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well										
Direction from well? How many feet?										
FROM	О	LITHO	LOGIC LO	G	FRO	M TO		PLUGGING IN	ITERVALS	
		psoil								
5 3	20 Re	d clay & shale r								
		mestone shale m	ix				3-150	borings plugged		
		rk gray shale irk gray limesto	no P- shalo		4	150	Bento	nito	. , , , , , , , , , , , , , , , , , , ,	
110 1	.50 Da	irk gray ilmesto	ne & snare			130	Dento	inte	4	
								410		
								,		
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) 11/12/12 and this record is true to the best of my knowledge and belief.										
Kansas Water W	ell Contra	ctor's License No.	757			Record was	complete	en on (mo/day/year)_	3/8/13	
under the busine	ss name of	Larsen & Asse	ociates, Inc	2.	by (sigr	ature)			-	
INSTRUCTIONS	: Please fill	in blanks or circle th	e correct answ	wers. Send to	three copie	s to Kansas D	Pepartmen	t of the In and Environm	nent, Bureau of Water,	
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of the Kn and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 6612-1367. Telephone 785-296-5522. Send one of 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.										