

**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: <b>Marion</b>	Fraction NE 1/4 NW 1/4 NW 1/4 NW 1/4	Section Number <b>21</b>	Township Number <b>T 19 S</b>	Range Number <b>R 2</b> <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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**2 WELL OWNER:** Last Name: **Jost** First: **Clyde** 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: **913 220th St.**  
Address: City: **Hillsboro** State: **KS** ZIP: **67063**

<p><b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b></p> <p style="text-align: center;">N</p> <table border="1" style="width: 100%; height: 100px; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 25%; height: 25px;">X</td> <td style="width: 25%; height: 25px;"></td> <td style="width: 25%; height: 25px;"></td> <td style="width: 25%; height: 25px;"></td> </tr> <tr> <td style="border: none;">-- NW --</td> <td style="border: none;">-- NE --</td> <td style="border: none;"></td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">W</td> <td style="border: none;"></td> <td style="border: none;"></td> <td style="border: none;">E</td> </tr> <tr> <td style="border: none;">-- SW --</td> <td style="border: none;">-- SE --</td> <td style="border: none;"></td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;"></td> <td style="border: none;"></td> <td style="border: none;">S</td> <td style="border: none;"></td> </tr> </table> <p style="text-align: center;">----- 1 mile -----</p>	X				-- NW --	-- NE --			W			E	-- SW --	-- SE --					S		<p><b>4 DEPTH OF COMPLETED WELL:</b> <b>40</b> ft.</p> <p>Depth(s) Groundwater Encountered: 1) <b>10</b> ft. 2) ..... ft. 3) ..... ft., or 4) <input type="checkbox"/> Dry Well</p> <p>WELL'S STATIC WATER LEVEL: <b>10</b> ft.</p> <p><input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) <b>08/05/2014</b> <input type="checkbox"/> above land surface, measured on (mo-day-yr) .....</p> <p>Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm Well water was ..... ft. after ..... hours pumping ..... gpm</p> <p>Estimated Yield: <b>20</b> gpm Bore Hole Diameter: <b>9</b> in. to <b>40</b> ft. and ..... in. to ..... ft.</p>	<p><b>5 Latitude:</b> <b>38.390684</b> (decimal degrees) <b>Longitude:</b> <b>97.222513</b> (decimal degrees) Datum: <input type="checkbox"/> WGS 84 <input checked="" type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 Source for Latitude/Longitude: <input type="checkbox"/> GPS (unit make/model: .....) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: .....</p> <p><b>6 Elevation:</b> <b>1391</b> ft. <input checked="" type="checkbox"/> Ground Level <input type="checkbox"/> TOC Source: <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input checked="" type="checkbox"/> Other <b>KOLAR</b></p>
X																						
-- NW --	-- NE --																					
W			E																			
-- SW --	-- SE --																					
		S																				

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

1. Domestic: <input checked="" 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? .....
	9. Environmental Remediation: well ID .....	a) Closed Loop <input type="checkbox"/> Horizontal <input 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 ..... CASING JOINTS:  Glued  Clamped  Welded  Threaded

Casing diameter **5** in. to **20** ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
Casing height above land surface **12** in. Weight **2.37** lbs./ft. Wall thickness or gauge No. **214**

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 **20** ft. to **35** 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 **0** ft. to **20** ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**Nearest source of possible contamination:**

<input type="checkbox"/> Septic Tank	<input type="checkbox"/> Lateral Lines	<input type="checkbox"/> Pit Privy	<input type="checkbox"/> Livestock Pens	<input type="checkbox"/> Insecticide Storage
<input type="checkbox"/> Sewer Lines	<input type="checkbox"/> Cess Pool	<input type="checkbox"/> Sewage Lagoon	<input type="checkbox"/> Fuel Storage	<input type="checkbox"/> Abandoned Water Well
<input type="checkbox"/> Watertight Sewer Lines	<input type="checkbox"/> Seepage Pit	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Fertilizer Storage	<input type="checkbox"/> Oil Well/Gas Well
<input type="checkbox"/> Other (Specify) .....				

Direction from well? ..... Distance from well? ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Topsoil			
2	10	Clay, tan			
10	35	Shale, gray w/small fractures			
35	40	Shale w/mica layers			

**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) **08/05/2014**..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **138**..... This Water Well Record was completed on (mo-day-year) **08/06/2014**..... under the business name of **Peterson Irrigation, Inc.**