

WATER WELL RECORD Form WWC-5

☐ Original Record ☐ Correction ☐ Change in Well Use

Division of Water
Resources App. No.

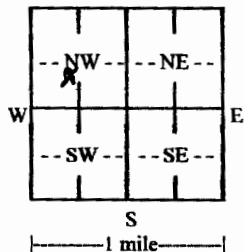
Well ID

1 LOCATION OF WATER WELL: County: MASHALL	Fraction 1/4 NE 1/4 SW 1/4 NW 1/4	Section Number 13	Township Number T 1 S	Range Number R 7 E W
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2 WELL OWNER: Last Name: **ALBRECHT** First: **ERIC**
Business:
Address: **337 12TH TERRACE**
Address:
City: **OKETO** State: **KS** ZIP: **66518**

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: ☒

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



4 DEPTH OF COMPLETED WELL: **55** ft.
Depth(s) Groundwater Encountered: 1) **55** ft.
2) **29** ft. 3) **29** ft. or 4) ☐ Dry Well
WELL'S STATIC WATER LEVEL: **29** ft.
☒ below land surface, measured on (mo-day-yr) **10/8/2020**
☐ above land surface, measured on (mo-day-yr) **10/8/2020**
Pump test data: Well water was **29** ft.
after **2** hours pumping **29** gpm
Well water was **29** ft.
after **2** hours pumping **29** gpm
Estimated Yield: **10** gpm
Bore Hole Diameter: **8** in. to **55** ft. and
8 in. to **55** ft.

5 Latitude: **39 57.954N** (decimal degrees)
Longitude: **96 35.785W** (decimal degrees)
Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☒ NAD 27
Source for Latitude/Longitude:
☒ GPS (unit make/model: **MAGELLAN/EXPLORIS**)
(WAAS enabled? ☐ Yes ☐ No)
☐ Land Survey ☐ Topographic Map
☐ Online Mapper:

6 Elevation: **29** ft. ☐ Ground Level ☐ TOC
Source: ☐ Land Survey ☒ GPS ☐ Topographic Map
☐ Other

7 WELL WATER TO BE USED AS:

- | | | |
|---|---|---|
| 1. Domestic:
<input type="checkbox"/> Household
<input checked="" 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 |
| 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 | 12. Geothermal: how many bores?
a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical
b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water |
| | | 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 **35** ft., Diameter **5** in. to **35** ft., Diameter **5** in. to **35** ft.
Casing height above land surface **18** in. Weight **2.8** lbs./ft. Wall thickness or gauge No. **265**

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 **35** ft. to **55** ft., From **35** ft. to **55** ft., From **35** ft. to **55** ft.

GRAVEL PACK INTERVALS: From **20** ft. to **55** ft., From **20** ft. to **55** ft., From **20** ft. to **55** ft.

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other
Grout Intervals: From **0** ft. to **20** ft., From **0** ft. to **20** ft., From **0** ft. to **20** 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 checked="" 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? **NORTHWEST** Distance from well? **250** ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	4	BROWN CLAY	52	60	GRAY SHALE
4	17	YELLOW SHALE			
17	21	WHITE LIMESTONE			
21	30	YELLOW SHALE			
30	32	YELLOW LIMESTONE			
32	37	TAN LIMESTONE			
37	38	GRAY SHALE			
38	43	LIMESTONE (CAVERNOUS)			
43	52	LIGHT GRAY SHALE			

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) **10/8/2020** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **518** This Water Well Record was completed on (mo-day-year) **10/9/2020** under the business name of **BLUE VALLEY DRILLING INC.** Signature **[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.

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

KSA 82a-1212

Revised 7/10/2015