

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: Coffey		Fraction SW 1/4 NE 1/4 SE 1/4 SW 1/4		Section Number 23		Township Number T 22 S		Range Number R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W																																																	
2 WELL OWNER: Last Name: Louia Business: Address: Address: PO Box 341 City: LeRoy State: KS ZIP: 66857		First: Ryan & Nichole		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: <input type="checkbox"/> 2100 feet NE of intersection of Shetland Rd and 6th Rd, LeRoy, KS.																																																					
3 LOCATE WELL WITH "X" IN SECTION BOX: N <div style="border: 1px solid black; width: 100px; height: 100px; position: relative; margin: 10px auto;"><div style="position: absolute; top: 0; left: 0; width: 100%; height: 100%; border: 1px solid black; border-style: dashed;">NW NE SW SE</div></div> S (-----1 mile-----)		4 DEPTH OF COMPLETED WELL: 60 ft. Depth(s) Groundwater Encountered: 1) 20 ft. 2) ft. 3) ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: 19 ft. <input type="checkbox"/> below land surface, measured on (mo-day-yr)..... <input type="checkbox"/> 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: 15 gpm Bore Hole Diameter: 8.75 in. to 60 ft. and in. to ft.		5 Latitude: 38.113843 (decimal degrees) Longitude: -95.621449 (decimal degrees) Horizontal Datum: <input checked="" type="checkbox"/> WGS 84 <input 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 checked="" type="checkbox"/> Online Mapper: 6 Elevation: ft. <input type="checkbox"/> Ground Level <input type="checkbox"/> TOC Source: <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other																																																					
7 WELL WATER TO BE USED AS: 1. Domestic: <input checked="" type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock 2. <input type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial 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 9. Environmental Remediation: well ID <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection 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? 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, date sample was submitted: Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																																									
8 TYPE OF CASING USED: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded Casing diameter 5 in. to 0-40 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 24 in. Weight lbs./ft. Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous Slot <input type="checkbox"/> Mill Slot <input type="checkbox"/> Gauze Wrapped <input type="checkbox"/> Torch Cut <input type="checkbox"/> Drilled Holes <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Louvered Shutter <input type="checkbox"/> Key Punched <input type="checkbox"/> Wire Wrapped <input checked="" type="checkbox"/> Saw Cut <input type="checkbox"/> None (Open Hole) SCREEN-PERFORATED INTERVALS: From 40 ft. to 60 ft., From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 40 ft. to 60 ft., From ft. to ft., From ft. to ft.																																																									
9 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other Grout Intervals: From 0 ft. to 40 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 checked="" type="checkbox"/> Other (Specify) Pond Direction from well? West Distance from well? 270 ft.																																																									
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">10 FROM TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>LITHO. LOG (cont.) or PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>7</td> <td>Soil and Clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>7</td> <td>18</td> <td>Sandy Clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>18</td> <td>35</td> <td>Sand-coarse</td> <td></td> <td></td> <td></td> </tr> <tr> <td>35</td> <td>39</td> <td>Sandy clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>39</td> <td>46</td> <td>River rock</td> <td></td> <td></td> <td></td> </tr> <tr> <td>46</td> <td>60</td> <td>Shale</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="6" style="height: 40px; vertical-align: top;">Notes:</td> </tr> </tbody> </table>										10 FROM TO		LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS	0	7	Soil and Clay				7	18	Sandy Clay				18	35	Sand-coarse				35	39	Sandy clay				39	46	River rock				46	60	Shale				Notes:					
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11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo-day-year) 03/07/2022 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 1012. This Water Well Record was completed on (mo-day-year) 03/09/2022 under the business name of Allens Holdings & Investments dba EED. Signature: <i>James E. Allen</i> 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																																																									