

# WATER WELL RECORD Form WWC-5

☒ Original Record ☐ Correction ☐ Change in Well Use

Division of Water  
Resources App. No.

Well ID

<b>1 LOCATION OF WATER WELL:</b> County: Coffey		Fraction NW ¼ SE ¼ SW ¼		Section Number 9		Township Number T 22 S		Range Number R 16 <input checked="" type="checkbox"/> E <input type="checkbox"/> W																																																													
<b>2 WELL OWNER:</b> Last Name: Maankowski First: Mark Business: Address: Address: 1734 8th Rd SE City: LeRoy State: KS ZIP: 66857				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 checked="" type="checkbox"/>																																																																	
<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> N <div style="border: 1px solid black; width: 100px; height: 100px; margin: 10px auto; position: relative;"> <div style="position: absolute; top: 0; left: 0; width: 50%; height: 50%; border-right: 1px solid black; border-bottom: 1px solid black;"></div> <div style="position: absolute; top: 0; left: 50%; width: 50%; height: 50%; border-right: 1px solid black; border-bottom: 1px solid black;"></div> <div style="position: absolute; top: 50%; left: 0; width: 50%; height: 50%; border-right: 1px solid black; border-bottom: 1px solid black;"></div> <div style="position: absolute; top: 50%; left: 50%; width: 50%; height: 50%; border-right: 1px solid black; border-bottom: 1px solid black;"></div> </div> W E S 1 mile		<b>4 DEPTH OF COMPLETED WELL:</b> 29 ft. Depth(s) Groundwater Encountered: 1) 18 ft. 2) ft. 3) ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: 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 29 ft. and in. to ft.		<b>5 Latitude:</b> 38.141984 (decimal degrees) <b>Longitude:</b> -95.657907 (decimal degrees) <b>Horizontal Datum:</b> <input checked="" type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 <b>Source for Latitude/Longitude:</b> <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:																																																																	
<b>6 Elevation:</b> ft. <input type="checkbox"/> Ground Level <input type="checkbox"/> TOC <b>Source:</b> <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other																																																																					
<b>7 WELL WATER TO BE USED AS:</b> 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):																																																																					
<b>Was a chemical/bacteriological sample submitted to KDHE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, date sample was submitted:																																																																					
<b>Water well disinfected?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																																																					
<b>8 TYPE OF CASING USED:</b> <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other Casing diameter 5 in. to 0-19 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 24 in. Weight lbs./ft. Wall thickness or gauge No.																																																																					
<b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> <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)																																																																					
<b>SCREEN OR PERFORATION OPENINGS ARE:</b> <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)																																																																					
<b>SCREEN-PERFORATED INTERVALS:</b> From 19 ft. to 29 ft., From ft. to ft., From ft. to ft. <b>GRAVEL PACK INTERVALS:</b> From 19 ft. to 29 ft., From ft. to ft., From ft. to ft.																																																																					
<b>9 GROUT MATERIAL:</b> <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 19 ft., From ft. to ft., From ft. to ft.																																																																					
<b>Nearest source of possible contamination:</b> <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) None within 200 feet																																																																					
Direction from well? Distance from well? ft.																																																																					
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>10 FROM</th> <th>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>Clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>18</td> <td>20</td> <td>Sandy Clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>20</td> <td>29</td> <td>Coarse River Rock</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>										10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS	0	7	Soil and Clay				7	18	Clay				18	20	Sandy Clay				20	29	Coarse River Rock																																	
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<b>Notes:</b>																																																																					
<b>11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> 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) 03/22/2022 under the business name of Allens Holdings & Investments dba EE 1012. Signature <i>James S. Chavis</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 <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> KSA 82a-1212 Revised 7/10/2015																																																																					