

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: Butler			Fraction NW $\frac{1}{4}$ SE $\frac{1}{4}$ SE $\frac{1}{4}$	Section Number 6	Township Number T 27 S	Range Number R 3 E/W
Distance and direction from nearest town or city street address of well if located within city? 703 Cornerstone Ct.			Global Positioning System (decimal degrees, min. of 4 digits)			
2 WATER WELL OWNER: Treescape INC RR#, St. Address, Box # : 1202 N. Andover Rd City, State, ZIP Code : Andover, KS 67002			Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____			
3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>100</u> ft.				
		Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft. WELL'S STATIC WATER LEVEL <u>28</u> ft. below land surface measured on mo/day/yr Pump test data: Well water was ft. after hours pumping gpm Est. Yield <u>25</u> gpm: Well water was ft. after hours pumping gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well				
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>x</u> ; If yes, mo/day/yr Sample was submitted Water Well Disinfected? Yes <u>x</u> No _____				
5 TYPE OF CASING USED:		5 Wrought Iron 1 Steel 2 PVC	8 Concrete tile 6 Asbestos-Cement 7 Fiberglass	CASING JOINTS: Glued <u>x</u> Clamped Welded Threaded		
Blank casing diameter		<u>5</u> in. to <u>40</u> ft., Dia	in. to	ft., Dia	in. to	ft.
Casing height above land surface		<u>12</u> in., Weight	<u>2.40</u>	lbs./ft.	Wall thickness or gauge No.	<u>160psi</u>
TYPE OF SCREEN OR PERFORATION MATERIAL:						
1 Steel 3 Stainless steel 5 Fiberglass <u>7</u> 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)						
SCREEN OR PERFORATION OPENINGS ARE:						
1 Continuous slot <u>3</u> Mill slot 5 Guaze 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 <u>40</u> ft. to <u>100</u> ft. From _____ ft. to _____ ft.						
GRAVEL PACK INTERVALS: From <u>28</u> ft. to <u>100</u> ft. From _____ ft. to _____ ft.						
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>3</u> Bentonite 4 Other						
Grout Intervals From <u>3</u> ft. to <u>28</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.						
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 below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well <u>3</u> Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well						
Direction from well? North How many feet? 65ft						
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>1</u>	Top Soil				
<u>1</u>	<u>24</u>	Clay				
<u>24</u>	<u>100</u>	Limestone				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, <u>(2)</u> reconstructed, or <u>(3)</u> plugged under my jurisdiction and was completed on (mo/day/year) 4-13-2007 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 740 . This Water Well Record was completed on (mo/day/year) 4-16-2007 under the business name of Weninger Drilling Inc. by (signature) <u>Kelsey Weninger</u>						
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to 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 .						

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