

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:

County: Butler

Fraction

NE $\frac{1}{4}$ SE $\frac{1}{4}$ SE $\frac{1}{4}$

Section Number

32

Township Number

T 27

Range Number

R 3

E/W

Distance and direction from nearest town or city street address of well if located within city?

14848 SW 120th, Andover, KS 67002

Global Positioning Systems (decimal degrees, min. of 4 digits)

Latitude: _____

Longitude: _____

Elevation: _____

Datum: _____

Data Collection Method: _____

2 WATER WELL OWNER:

RR#, St. Address, Box #

Morgan Property

City, State, ZIP Code

14848 SW 120th

Andover, KS 67002

3 LOCATE WELL'S

LOCATION

WITH AN "X" IN
SECTION BOX:

N

--NW--	--NE--	
--SW--	--SE--	

S

4 DEPTH OF COMPLETED WELL 32

ft.

Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.

WELL'S STATIC WATER LEVEL 13.6

ft. below land surface measured on mo/day/yr

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield _____ 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 Feedlot

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 ☒

Sample was submitted _____

Water well disinfected? Yes _____ No ☒

If yes, mo/day/yr

5 TYPE OF CASING USED:

1 Steel

3 RMP (SR)

5 Wrought Iron

6 Asbestos-Cement

8 Concrete tile

9 Other (specify below)

CASING JOINTS: Glued _____ Clamped _____

Welded _____

Threaded Yes

Blank casing diameter _____ in. to _____ ft., Diameter.

in. to _____ ft., Diameter

Casing height above land surface _____ in., Weight _____ lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel

3 Stainless Steel

5 Fiberglass

7 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 3 Mill slot

5 Gauzed 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 _____ ft. to _____ ft., From _____ ft. to _____ ft.

From _____ ft. to _____ ft., From _____ ft. to _____ ft.

From _____ ft. to _____ ft., From _____ ft. to _____ ft.

From _____ ft. to _____ ft., From _____ ft. to _____ ft.

From _____ ft. to _____ ft., From _____ ft. to _____ ft.

From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.

From _____ ft. to _____ ft., From _____ ft. to _____ ft.

From _____ ft. to _____ ft., From _____ ft. to _____ ft.

From _____ ft. to _____ ft., From _____ ft. to _____ ft.

From _____ ft. to _____ ft., From _____ ft. to _____ ft.

From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL:

1 Neat cement

2 Cement grout

3 Bentonite

4 Other Cement

Grout Intervals: 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

999

3 Watertight sewer lines

6 Seepage pit

9 Feedyard

12 Fertilizer Storage

15 Oil well/gas well

Direction from well? 999

How many feet? 999

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0'	5'	Lt Brn: Silty w/White Clay			
5'	10'	5'-7' Transition to Silty Olive Clay			
10'	15'	Olive Silty Clay			
15'	20'	17' Lt Green Clay Moist to Lt Olive Clay Dry (Shale)			
20'	24'	21'-24' Shale Solid			
24'	25'	Soft Shale/Solid Shale			B-1.
25'	30'	Shale Olive to Gray			
30'		Hard Limestone (Refusal)			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:

This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 9/27/07 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. 665

This Water Well Record was completed on (mo/day/year) 11/26/07

under the business name of Pratt Well Service, Inc.

by (signature)

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1 000 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.kdhe.state.ks.us/geo/waterwells>