

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: <i>Benton</i>		Fraction <i>1/4 SW 1/4 SW 1/4 SW 1/4 SW</i>	Section Number <i>5</i>	Township Number <i>T 27 S</i>	Range Number <i>R 3 E W</i>
2 WELL OWNER: Last Name: <i>Nguyen</i> First: <i>Jackie</i> Business: <i>2258 N Andover Rd</i> Address: Address: City: <i>Andover</i>		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"/>			
3 LOCATE WELL WITH "X" IN SECTION BOX: N W E S 1 mile		4 DEPTH OF COMPLETED WELL: <i>95</i> ft. Depth(s) Groundwater Encountered: 1) ft. 2) ft. 3) ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: <i>21</i> 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: gpm Bore Hole Diameter: <i>11</i> in. to ft. and in. to ft.			
		5 Latitude:(decimal degrees) Longitude:(decimal degrees) Datum: <input 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 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: Household Lawn & Garden Livestock
2. Irrigation
3. Feedlot
4. Industrial
5. Public Water Supply: well ID
6. Dewatering: how many wells?
7. Aquifer Recharge: well ID
8. Monitoring: well ID
9. Environmental Remediation: well ID
10. Air Sparge Soil Vapor Extraction Recovery Injection

10. Oil Field Water Supply: lease
11. Test Hole: well ID
12. Geothermal: how many bores?
- a) Closed Loop Horizontal Vertical
- b) Open Loop Surface Discharge Inj. of Water
13. 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 *95* ft., Diameter in. to ft., Diameter in. to ft.
 Casing height above land surface *160* in. Weight *160* lbs./ft. Wall thickness or gauge No. *26*

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 *45* ft. to *95* ft., From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From *24* ft. to *95* ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other

Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft.

Nearest source of possible contamination:

<input type="checkbox"/> Septic Tank	<input checked="" 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)				

Direction from well? *North* Distance from well? *75'* ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
<i>0</i>	<i>2</i>	<i>Topsoil</i>			
<i>2</i>	<i>7</i>	<i>Clay</i>			
<i>7</i>	<i>33</i>	<i>Shale</i>			
<i>33</i>	<i>39</i>	<i>Limestone</i>			
<i>39</i>	<i>91</i>	<i>Shale</i>			
<i>91</i>	<i>95</i>	<i>Limestone</i>			

Notes:

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) *1-17-13*, and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. *611*. This Water Well Record was completed on (mo-day-year) *2-6-13* under the business name of *Chase Drilling*.

INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.