

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:

Bullawa

Fraction

1/4 SE 1/4 NW 1/4 NW 1/4

Section Number

19

Township Number

T 27 S

Range Number

R 30 E

2 WELL OWNER: Last Name:

Business:

Address:

Address:

City:

Lazen
320 East Mount Ct
Andover

First:

Shirley

State:

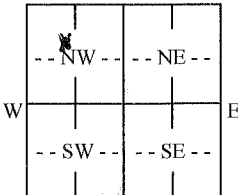
Ks

ZIP: *67002*

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: ☒

3 LOCATE WELL WITH "X" IN SECTION BOX:

N



S

-----1 mile-----

4 DEPTH OF COMPLETED WELL: *110* ft.

Depth(s) Groundwater Encountered: 1) ft.

2) ft. 3) ft. or 4) ☐ Dry Well

WELL'S STATIC WATER LEVEL: *33* ft.

☐ below land surface, measured on (mo-day-yr).....

☐ 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: *12* in. to ft. and

..... in. to ft.

5 Latitude: (decimal degrees)

Longitude: (decimal degrees)

Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27

Source for Latitude/Longitude:

☐ GPS (unit make/model:)

(WAAS enabled? ☐ Yes ☐ No)

☐ Land Survey ☐ Topographic Map

☐ Online Mapper:

6 Elevation: ft. ☐ Ground Level ☐ TOC

Source: ☐ Land Survey ☐ GPS ☐ Topographic Map

☐ 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

☐ Air Sparge

☐ Soil Vapor Extraction

☐ Recovery

☐ Injection

10. ☐ Oil Field Water Supply: lease

11. Test Hole: well ID

☐ Cased ☐ Uncased ☐ Geotechnical

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 *110* ft. Diameter in. to ft. Diameter in. to ft.

Casing height above land surface *16* in. Weight *160* lbs./ft. Wall thickness or gauge No. *24*

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 *40* ft. to *110* ft. From ft. to ft. From ft. to ft.

GRAVEL PACK INTERVALS: From *24* ft. to *110* ft. From ft. to ft. From ft. to ft.

9 GROUT MATERIAL:

☐ Neat cement

☐ Cement grout

☒ Bentonite

☐ Other

Grout Intervals: From *4* ft. to *24* ft. From *24* ft. to ft. From ft. to ft.

Nearest source of possible contamination:

☐ Septic Tank

☐ Lateral Lines

☐ Pit Privy

☐ Livestock Pens

☐ Insecticide Storage

☐ Sewer Lines

☐ Cess Pool

☐ Sewage Lagoon

☐ Fuel Storage

☐ Abandoned Water Well

☒ Watertight Sewer Lines

☐ Seepage Pit

☐ Feedyard

☐ Fertilizer Storage

☐ Oil Well/Gas Well

☐ Other (Specify)

Direction from well? *East* Distance from well? *90'* ft.

10 FROM

TO

LITHOLOGIC LOG

FROM

TO

LITHO. LOG (cont.) or PLUGGING INTERVALS

0 *2* *Top Soil*
2 *17* *Clay*
17 *31* *Green Shale*
31 *107* *Blue Shale*
107 *110* *Limestone*

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) *7/29/13* 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) *8/26/13*

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.

Visit us at <http://www.kdheks.gov/waterwell/index.html>

KSA 82a-1212

Revised 9/10/2012