

WATER WELL RECORD Form WWC-5

Division of Water
Resources App. No.

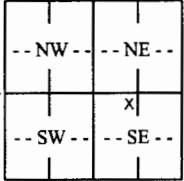
Well ID

MW7R

☒ Original Record ☐ Correction ☐ Change in Well Use

1 LOCATION OF WATER WELL: County: Sedgwick		Fraction NE ¼ SE ¼ NE ¼ SE ¼	Section Number 31	Township Number T 28 S	Range Number R 1 E <input checked="" type="checkbox"/> W
---	--	---------------------------------	-----------------------------	----------------------------------	--

2 WELL OWNER: Last Name: HYING First: DOUG		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"/>
Business: Address: 345 N. MAIN		
City: HAYSVILLE State: KS ZIP: 67060		

3 LOCATE WELL WITH "X" IN SECTION BOX: N  S -----1 mile-----	4 DEPTH OF COMPLETED WELL: 19.73 ft. Depth(s) Groundwater Encountered: 1) 16 ft. 2) ft. 3) ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: 15.39 ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) 9/11/17 <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: _____ in. to _____ ft. and _____ in. to _____ ft.	5 Latitude: 37.56976 (decimal degrees) Longitude: 97.35249 (decimal degrees) Horizontal Datum: <input type="checkbox"/> WGS 84 <input checked="" 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 checked="" type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: _____
	6 Elevation: 1264.43 ft. <input checked="" type="checkbox"/> Ground Level <input type="checkbox"/> TOC Source: <input checked="" 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: <input 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 checked="" type="checkbox"/> Monitoring: well ID MW7R 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): _____

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 2 in. to 20 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.

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

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 10 ft. to 20 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 8 ft. to 20 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☒ Other **Concrete Surface Completion 0 - 0.85**

Grout Intervals: From 0 ft. to 85 ft., From 85 ft. to 6 ft., From 6 ft. to 8 ft.

Nearest source of possible contamination:

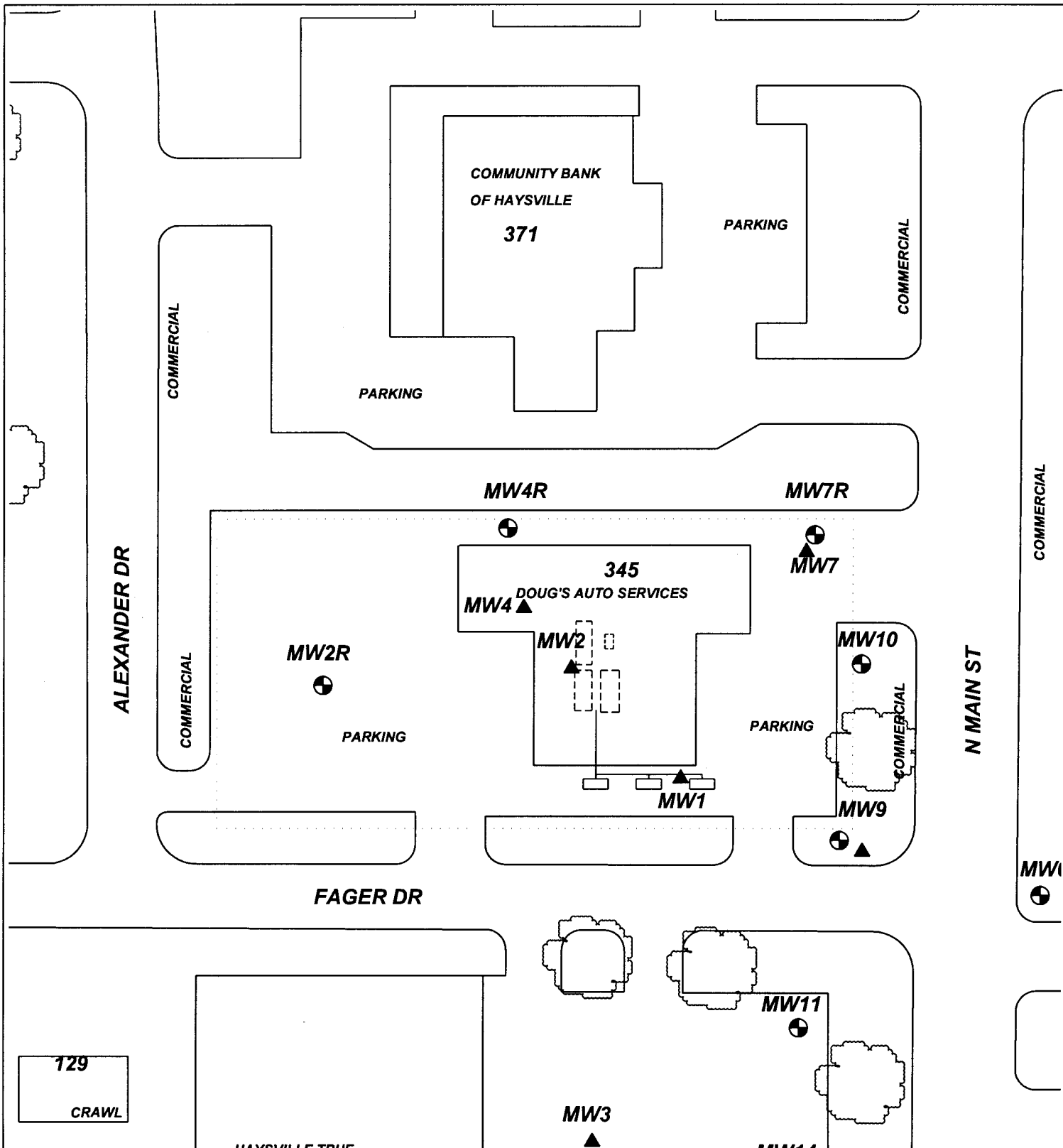
<input type="checkbox"/> Septic Tank	<input type="checkbox"/> Lateral Lines	<input type="checkbox"/> Pit Privy	<input type="checkbox"/> Livestock Pens	<input type="checkbox"/> Insecticide Storage
<input type="checkbox"/> Sewer Lines	<input type="checkbox"/> Cess Pool	<input type="checkbox"/> Sewage Lagoon	<input checked="" 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? _____ Distance from well? _____ ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	.5	CONCRET			
.5	8	SILTY CLAY			
8	12	CLAYEY SAND			
12	20	SAND			

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) 9/11/17 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 585. This Water Well Record was completed on (mo-day-year) 9/27/17 under the business name of ASSOCIATED ENVIRONMENTAL INC. Signature _____



PROJECT: DOUG'S AMOCO SERVICE		 ASSOCIATED ENVIRONMENTAL INC.	LEGEND:  = FORMER UST BASIN/EXCAVATION  = FORMER PUMP ISLANDS  = MONITOR WELL  = PLUGGED/DESTROYED WELL  = SUBJECT PROPERTY
ADDRESS: 345 N. MAIN			
LOCATION: HAYSVILLE, KS			
DRAWN BY: B. STALNAKER	DATE: 5/16/17		
REVISED BY: B. STALNAKER		DATE: 9/27/17	
AEI JOB #: TF504		KDHE JOB #: U2-087-00855	
SCALE: 1" = 50'		NOTES:	