

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: <u>Saline</u> Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ 15610 E 63rd		Fraction <u>SE SW SE</u> 25		Section Number 25		Township No. T 28 S		Range Number R 2 E			
2 WATER WELL OWNER: RR#, Street Address, Box #: City, State, ZIP Code : ms Brundige 15612 E 63rd, Derby KS 67037		Global Positioning System (GPS) information: Latitude: (in decimal degrees) Longitude: (in decimal degrees) Elevation: Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27 Collection Method: ☐ GPS unit (Make/Model:) ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m									
3 LOCATE WELL WITH AN "X" IN SECTION BOX: N <table border="1" style="width: 100px; margin: 10px auto; border-collapse: collapse;"> <tr> <td style="width: 50px; height: 50px; text-align: center;">NW</td> <td style="width: 50px; height: 50px; text-align: center;">NE</td> </tr> <tr> <td style="width: 50px; height: 50px; text-align: center;">SW</td> <td style="width: 50px; height: 50px; text-align: center;">SE</td> </tr> </table> S -----1 mile-----		NW	NE	SW	SE	4 DEPTH OF COMPLETED WELL ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... ft. below land surface measured on mo/day/yr. <u>4-25-12</u> Pump test data: Well water was..... ft. after..... hours pumping..... gpm EST. YIELD..... gpm. Well water was..... ft. after..... hours pumping..... gpm Bore Hole Diameter in. to ft., and in. to ft. WELL WATER TO BE USED AS: ☐ Public water supply ☐ Geothermal ☐ Injection well ☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below) ☐ Irrigation ☐ Industrial ☒ Domestic-lawn & garden ☐ Monitoring well Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☒ No If yes, mo/day/yr sample was submitted..... Water well disinfected? ☐ Yes ☒ No					
NW	NE										
SW	SE										
5 TYPE OF CASING USED: ☐ Steel ☒ PVC ☐ Other CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface..... in., Weight lbs./ft., Wall thickness or gauge No. <u>160</u> TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify) ☐ Brass ☐ Galvanized Steel ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: ☐ Continuous slot ☐ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole) ☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☐ Saw cut ☐ Other (specify) SCREEN-PERFORATED INTERVALS: 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.											
6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other Grout Intervals: From..... ft. to ft., From..... ft. to ft., From..... ft. to ft. What is the nearest source of possible contamination: ☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below) ☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well ☒ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well Direction from well <u>west</u> Distance from well <u>1.5</u>											
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS						
		Raise 6" casing well up to code 12" above ground									
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☐ constructed, ☒ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo/day/year) <u>4-25-12</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's license No. <u>473</u> This Water Well Record was completed on (mo/day/year) <u>4-25-12</u> under the business name of <u>Beardley Pump & Well</u> by (signature) <u>David Beck</u>											
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html .											