

WATER WELL RECORD

Form WWC-5

Division of Water Resources: App. No.

1 LOCATION OF WATER WELL:		Fraction NW 1/4 SW 1/4 NE 1/4		Section Number 12	Township Number T 29 S	Range Number R 1 E
County: Sedgwick				Global Positioning System (decimal degrees, min. of 4 digits)		
Distance and direction from nearest town or city street address of well if located within city? 100 N Baltimore, Derby KS, 67037				Latitude: N 37.54316°		
				Longitude: W 97.26958°		
2 WATER WELL OWNER: KDHE				Elevation: 1288.55 pin/ 1288.07 toc		
RR#, St. Address, Box # : 1000 SW Jackson, Suite 410				Datum: above mean sea level		
City, State, ZIP Code : Topeka, KS 66612				Data Collection Method: legal survey		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>45</u> ft.				
		BMW2				
		Depth(s) Groundwater Encountered <u>1</u> ft. <u>2</u> ft. <u>3</u> ft.				
		WELL'S STATIC WATER LEVEL <u>38.00</u> ft. below land surface measured on mo/day/yr <u>2/13/08</u>				
		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 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)				
		2 Irrigation 4 Industrial 7 Domestic (lawn & garden) <u>10</u> Monitoring well				
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr				
		Sample was submitted _____ Water Well Disinfected? Yes _____ No <u>X</u>				
5 TYPE OF CASING USED:						
1 Steel		3 RMP (SR)		5 Wrought Iron		8 Concrete tile
<u>2</u> PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)
		7 Fiberglass				CASING JOINTS: Glued _____ Clamped _____
Blank casing diameter <u>2</u> in. to <u>30</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.						Welded _____ Threaded <u>X</u>
Casing height below land surface <u>0.48</u> ft., Weight _____ lbs./ft. Wall thickness or gauge No. _____						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
1 Steel		3 Stainless steel		5 Fiberglass		<u>7</u> PVC
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		<u>3</u> Mill slot		5 Gauge wrapped		7 Torch cut
2 Louvered shutter		4 Key punched		6 Wire wrapped		8 Saw Cut
						10 Other (specify) _____
SCREEN-PERFORATED INTERVALS: From <u>30</u> ft. to <u>45</u> ft. From _____ ft. to _____ ft.						
GRAVEL PACK INTERVALS: From <u>29</u> ft. to <u>45</u> ft. From _____ ft. to _____ ft.						
FROM _____ TO _____ LITHOLOGIC LOG						
FROM <u>0</u> TO <u>1'</u> Concrete						
FROM <u>3'</u> TO <u>5'</u> Brown coarse sand, not well sorted, moist, petroleum odor, gray sandy clay at 4.75 ft						
FROM <u>8'</u> TO <u>10'</u> Gray coarse sand, not well sorted, very moist, strong petroleum odor, some clay						
FROM <u>13'</u> TO <u>15'</u> Brown sandy clay, fine to medium grained, mottled gray, moist, petroleum odor						
FROM <u>18'</u> TO <u>20'</u> Brown silty clay, mottled gray, moist, petroleum odor						
FROM _____ TO _____ LITHOLOGIC LOG						
FROM <u>23'</u> TO <u>25'</u> Brown silty clay, mottled gray, moist, petroleum odor						
FROM <u>28'</u> TO <u>30'</u> Brown sandy clay, mottled gray, medium grained, Nodules with olive halos, moist, petroleum odor						
FROM <u>34'</u> TO <u>45'</u> Brown clayey sand, medium grained, moist, Petroleum odor						
Flushmount waiver from BOW						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>1</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>2/8/08</u> and this record is true to the best of my knowledge and belief.						
Kansas Water Well Contractor's License No. <u>757</u> . This Water Well Record was completed on (mo/day/year) <u>3/3/08</u>						
under the business name of <u>Larsen & Associates, Inc.</u> by (signature) _____						
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. 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.kdheks.gov/waterwell .						

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