

WATER WELL RECORD Form WWC-5

Division of Water Resources App. No.

Well ID

Original Record Correction Change in Well Use

1 LOCATION OF WATER WELL:
 County: ~~Osage~~ **EIK** Fraction **NW 1/4 SE 1/4 SE 1/4 SW 1/4** Section Number **4** Township Number **T30 S** Range Number **R13 E W**

2 WELL OWNER: Last Name: **KOIB** First: **Robb**
 Business:
 Address: **310 Hiwassee Rd**
 Address:
 City: **Towanda** State: **SL** ZIP: **29689**
 Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): **3 miles East of Busby on North side of Killeber Rd**

3 LOCATE WELL WITH "X" IN SECTION BOX:
 N
 W E
 S
 1 mile

4 DEPTH OF COMPLETED WELL: **75** ft.
 Depth(s) Groundwater Encountered: 1) **3'** ft.
 2) **47** ft. 3) ft., or 4) Dry Well
 WELL'S STATIC WATER LEVEL: **3** 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: **50** gpm
 Bore Hole Diameter: **8** in. to **75** ft. and
 in. to ft.

5 Latitude: **37.46108** (decimal degrees)
Longitude: **-95.99280** (decimal degrees)
 Horizontal 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: <input checked="" type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock	2. 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 type="checkbox"/> Monitoring: well ID	9. Environmental Remediation: well ID	10. <input type="checkbox"/> Oil Field Water Supply: lease	11. Test Hole: well ID	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

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 **7.5** ft., Diameter in. to ft., Diameter in. to ft.
 Casing height above land surface **18** in. Weight lbs./ft. Wall thickness or gauge No. **SDR 2.6**

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 **75** ft. to **65** ft., From ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From **75** ft. to **25** ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other
 Grout Intervals: From **2.5** ft. to **3** ft., From ft. to ft., From ft. to 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 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	3				
0	3	TOP soil			
3	15	Blond sandstone 1120			
15	44	shale 1020			
44	70	water sandstone white			
70	75	shale			
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) **6-1-22** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **975**. This Water Well Record was completed on (mo-day-year) **6-1-22** under the business name of **Eden Well Drilling**. Signature: *[Signature]*

Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524. Visit us at <http://www.kdheks.gov/waterwell/index.html> KSA 82a-1212 Revised 7/10/2015