

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: NEOSHO		Fraction SW ¼ SE ¼ SE ¼ SW ¼	Section Number 14	Township Number T 30 S	Range Number R 18 E W
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2 WELL OWNER: Last Name: SCHWARTZ First: PETIE		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="checked" type="checkbox"/>
Business: Address: 7300 40TH ROAD		
Address: City: GALESBURG State: KS ZIP: 66740		

3 LOCATE WELL WITH "X" IN SECTION BOX:
N

-- NW --		-- NE --	
W			E
-- SW --		-- SE --	
S			

X is located in the SW-SE section.

Scale: 1 mile

4 DEPTH OF COMPLETED WELL: **50** ft.

Depth(s) Groundwater Encountered: 1) **24** ft.
2) _____ ft. 3) _____ ft., or 4) Dry Well

WELL'S STATIC WATER LEVEL: **24** ft.

below land surface, measured on (mo-day-yr) **3-22-18**
 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: **10** ~~gpm~~ **HR**
Bore Hole Diameter: **8** in. to **50** ft. and _____ in. to _____ ft.

5 Latitude: **37o 25' 41.29"N** (decimal degrees)
Longitude: **95o 24' 36.69W** (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: **GOOGLE EARTH**

6 Elevation: **979** ft. Ground Level TOC
Source: Land Survey GPS Topographic Map
 Other _____

7 WELL WATER TO BE USED AS:

1. <input checked="checked" type="checkbox"/> Household	5. <input type="checkbox"/> Public Water Supply: well ID _____	10. <input type="checkbox"/> Oil Field Water Supply: lease _____
<input type="checkbox"/> Lawn & Garden	6. <input type="checkbox"/> Dewatering: how many wells? _____	11. Test Hole: well ID _____ <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical
<input type="checkbox"/> Livestock	7. <input type="checkbox"/> Aquifer Recharge: 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
2. <input type="checkbox"/> Irrigation	8. <input type="checkbox"/> Monitoring: well ID _____	13. <input type="checkbox"/> Other (specify): _____
3. <input type="checkbox"/> Feedlot	9. Environmental Remediation: well ID _____ <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection	
4. <input type="checkbox"/> Industrial		

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 **50** ft. Diameter _____ in. to _____ ft. Diameter _____ in. to _____ ft.

Casing height above land surface **15** in. Weight **160** 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 **50** ft. to **30** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From **50** ft. to **20** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other _____

Grout Intervals: From **20** ft. to **0** 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 checked="checked" 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? **WEST** Distance from well? **60 FT** ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	12	CLAY			
12	48	LIME			
48	50	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) **3-22-18** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **623**. This Water Well Record was completed on (mo-day-year) **4-7-18** under the business name of **GLEN CHASE DRILLING**. Signature: *Glen Chase*