

BR-25  
mw-241

# WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

|   |  |  |                               |                               |
|---|--|--|-------------------------------|-------------------------------|
| 1 LOCATION OF WATER WELL:<br>County: <u>Gabette</u>   | Fraction<br><u>NE 1/4 SW 1/4 SW 1/4 NW 1/4</u> | Section Number<br><u>11</u>  | Township No.<br><u>T 32 S</u> | Range Number<br><u>R 20 E</u> |
| Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/><br><u>KS RAP</u><br><u>Scott Rd + 2400 Rd</u><br><u>Parsas KS 67537</u> |  | Global Positioning System (GPS) information:<br>Latitude: <u>37.27530</u> (in decimal degrees)<br>Longitude: <u>-95.19305</u> (in decimal degrees)<br>Elevation: .....<br>Datum: <input checked="" type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27<br>Collection Method:<br><input checked="" type="checkbox"/> GPS unit (Make/Model: <u>Garmin Etrex</u> )<br><input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey<br>Est. Accuracy: <input type="checkbox"/> <3 m, <input checked="" type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m |                               |                               |
| 2 WATER WELL OWNER: <u>US Army Corps of Engineers</u><br>RR#, Street Address, Box #: <u>001 E 12st Rm 463</u><br>City, State, ZIP Code : <u>Kansas City MO 64106</u>  |  |  |                               |                               |

|   |  |
|---|--|
| 3 LOCATE WELL WITH AN "X" IN SECTION BOX:<br>N<br>W<br>SW<br>SE<br>E<br>S<br>1 mile | 4 DEPTH OF COMPLETED WELL <u>25.6</u> ft.<br>Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.<br>WELL'S STATIC WATER LEVEL..... ft. below land surface measured on mo/day/yr.....<br>Pump test data: Well water was..... ft. after..... hours pumping..... gpm<br>EST. YIELD..... gpm. Well water was..... ft. after..... hours pumping..... gpm<br>Bore Hole Diameter <u>6</u> in. to <u>2.5</u> ft., and ..... in. to ..... ft.<br>WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well<br><input type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below)<br><input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input checked="" type="checkbox"/> Monitoring well<br>Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If yes, mo/day/yr sample was submitted.....<br>Water well disinfected? <input type="checkbox"/> Yes <input type="checkbox"/> No |
|---|--|

5 TYPE OF CASING USED: ☐ Steel ☒ PVC ☐ Other .....

CASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ☒ Threaded  
Casing diameter 6 in. to 2.5 ft., Diameter 2 in. to 20 ft., Diameter ..... in. to ..... ft.  
Casing height above land surface 2.5 in., Weight 70 lbs./ft., Wall thickness or gauge No. 5/16 40

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 20 ft. to 25 ft., From ..... ft. to ..... ft.  
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From 19 ft. to 25 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 20 ft. to 19 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 ..... Distance from well .....

| FROM | TO   | LITHOLOGIC LOG | FROM | TO | LITHO. LOG (cont.) or PLUGGING INTERVALS |
|------|------|----------------|------|----|--|
| 0    | 2    | Clay           |      |    |  |
| 2    | 18   | Line Stone     |      |    |  |
| 18   | 24.5 | Shale          |      |    |  |
|      |      |                |      |    |  |
|      |      |                |      |    |  |
|      |      |                |      |    |  |
|      |      |                |      |    |  |
|      |      |                |      |    |  |
|      |      |                |      |    |  |
|      |      |                |      |    |  |

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) 9-14-15 and this record is true to the best of my knowledge and belief.  
Kansas Water Well Contractor's License No. 937 This Water Well Record was completed on (mo/day/year) 9-14-15  
under the business name of Cassidy Drilling by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3524. 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>