WATER WELL	RECORD	Form	WWC-5	D	ivision of Wa	iter Resou	rces; App. No.		
1 LOCATION OF			CIV	CXX.	Section Nu	ımber	Township Nun	nber	Range Number
County: Mo	ntgomery	or city street	SW 1/4	SW ¼	Clobal Pasi	itioning	T 34	S	R 16 E
located within city?	703 Ellis St. Coffey	ille KS	t address of	well ii	Latitude:			ai degre	es, min. of 4 digits)
Longitude: W 95.63538°									
2 WATER WELL OWNER: USD #445 Elevation: RIM: 742.98; TOC: 742.75									
RR#, St. Address	Box # : 615 Ell	is St							
City, State, ZIP C	ode : Coffey	ville, KS, 67	337-3427		Data Colle	ection Me	mean sea level ethod: legal su	rvey	
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 15 ft.									
LOCATON					MW9				
WITH AN "X"	N Depth(s) Groun	ndwater Enco	ountered 1			ft. 2	f	t. 3	ft. y/yr 6/30/09
SECTION BOX	: WELL'S STA	TIC WATER	R LEVEL	14.8	ft. below lar	nd surfac	e measured on	mo/da	y/yr 6/30/09
N	Pum	test data:	Well water	was	ft.	after	hours p	umpin	g gpm
	Test. Yield	gpm:	Well water	was	ft.	after	hours p	umpin	g gpm g gpm
NW-NE-	- WELL WATE	R TO BE US	SED AS: 5	Public v	vater supply	8 Air	conditioning	ll Inic	ection well
1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)									
w _ _	E 2 Irrigation 4	Industrial	7 Domestic	(lawn &	garden) (Monit	oring well		(Specify selett)
W 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) (10) Monitoring well									
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs									
Sample was submitted Water Well Disinfected? Yes No X No X									
1	Sample was su	ommed			· · · · · · · · · · · · · · · · · · ·	valer we	il Distillected:		140 A
5 TYPE OF CASI	NG USED: 5	Wrought Ire	on	8 Conc	rete tile	CASI	NG JOINTS: C	ilued	Clamped
1 Steel	3 RMP (SR) 6	Asbestos-C	ement	9 Other	(specify bel	low)	V	Velded	
(2)PVC	4 ABS 7	Fiberglass					T	hreade	ed X
Blank casing diameter	er 2 in. to	3 ft	., Dia		in. to	ft., 1	Dia	in. t	o ft.
2) PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 3 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.23 ft., Weight Ibs./ft. Wall thickness or gauge No.									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass (7) PVC 9 ABS 11 Other (specify) 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)									
2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)									
TROUGHNIAN DEDGAND ANTANIANCAN AREA									
1 Continuous slot 3 Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)									
SCREEN-PERFORATED INTERVALS: From 3 ft. to 15 ft. From ft. to ft.									
SCREEN-PERFORA	TIED INTERVALS	rrom	3	_ n. to _	15	- n. From	m	11. 10	
		From	2.5	π. to	15	_ n. From	m	n. to	ft.
GRAVEL PA	CK INTERVALS:	From		_ ft. to _		nt. From	m	π. to	π.
	CK INTERVALS:	From		ft. to		tt. Fro	m	nt. to	π.
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-1 ft Grout Intervals From 1 ft. to 2.5 ft. From ft. to ft. From ft. to ft. From ft. to ft. From ft. to ft.									
Grout Intervals From 1 ft. to 2.5 ft. From ft. to ft. From ft. to ft.									
What is the nearest source of possible contamination:									
1 Septic tank	4 Lateral li	nes 7 Pit pri	ivy 1	0 Lives	tock pens	13 Insec	ticide Storage	1	6 Other (specify
2 Sewer lines 5 Cess pool 8 Sewage lagoon (1) Fuel storage 14 Abandoned water well below)									
	er lines 6 Seepage						vell/ gas well		,
Direction from well?					ny feet? ~15		J		
FROM TO	LITHO	LOGIC LOC		FRO	M TO		PLUGGING	INTE	RVAIS
0 4	Clay with trace sil			TRO	10		110001110	44 1 1 1 1	
	brown, moist then			+					
4 8	Clay with trace sil			1					
	olive, moist		2.0						
8 15	Shale, highly weat	hered, olive	green						
		,							
						Flushm	ount waiver fr	om BO)W
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged									
under my jurisdiction and was completed on (mo/day/year) Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 7/23/09									
							(mo/day/year)	13/07
under the business nam					ature)		CII		
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 on 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.									