

## WATER WELL RECORD

## Form WWC-5

Division of Water Resources App. No.

<b>1 LOCATION OF WATER WELL:</b>		Fraction	Section Number	Township No.	Range Number
County: <u>Cherokee</u>		<u>SE 1/4 SE 1/4 SE 1/4 SE 1/4</u>	<u>13</u>	<u>T 34 S</u>	<u>R 25</u> <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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"/> .					
620 Stateline Road, Galena, Ks.					
<b>2 WATER WELL OWNER:</b>			Global Positioning System (GPS) information:		
RR#, Street Address, Box #: <u>O'Brien Ready Mix</u>			Latitude: <u>37.074882°</u> (in decimal degrees)		
City, State, ZIP Code: <u>St. Paul, Ks. 66771</u>			Longitude: <u>94.618670°</u> (in decimal degrees)		
			Elevation: <u>969 ft.</u>		
			Datum: <input checked="" type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27		
			Collection Method:		
			<input type="checkbox"/> GPS unit (Make/Model: _____)		
			<input checked="" type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey		
			Est. Accuracy: <input checked="" type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m		

<b>3 LOCATE WELL WITH AN "X" IN SECTION BOX:</b>		<b>4 DEPTH OF COMPLETED WELL</b> <u>705</u> ft.	
		Depth(s) Groundwater Encountered (1) <u>365</u> ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL <u>278</u> ft. below land surface measured on mo/day/yr. <u>7-26-13</u> Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm EST. YIELD <u>50</u> gpm. Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter _____ in. to _____ ft., and _____ in. to <u>705</u> ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <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) <input type="checkbox"/> Irrigation <input checked="" type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted _____ Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

<b>5 TYPE OF CASING USED:</b> <input checked="" type="checkbox"/> Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other _____	
CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Threaded	
Casing diameter <u>658</u> in. to <u>65</u> ft., Diameter <u>6</u> in. to <u>705</u> ft., Diameter _____ in. to _____ ft.	
Casing height above land surface <u>12</u> in., Weight <u>13</u> lbs./ft., Wall thickness or gauge No. <u>188</u>	
TYPE OF SCREEN OR PERFORATION MATERIAL:	
<input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input checked="" type="checkbox"/> None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:	
<input type="checkbox"/> Continuous slot <input type="checkbox"/> Mill slot <input type="checkbox"/> Gauze wrapped <input type="checkbox"/> Torch cut <input type="checkbox"/> Drilled holes <input type="checkbox"/> None (open hole) <input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input type="checkbox"/> Wire wrapped <input type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify) _____	
SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.	
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.	

<b>6 GROUT MATERIAL:</b> <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Cement grout <input type="checkbox"/> Bentonite <input type="checkbox"/> Other _____	
Grout Intervals: From <u>0</u> ft. to <u>65</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.	
What is the 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"/> Other (specify below) <input type="checkbox"/> Sewer lines <input type="checkbox"/> Cesspool <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Fuel storage <input type="checkbox"/> Abandoned water well <input checked="" type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Sepage pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Oil well/gas well	
Direction from well <u>South</u> Distance from well <u>50'</u>	

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	38	Overburden			
38	197	Lime			
197	348	Flint - Reed Springs			
348	356	Northwell			
356	705	Dalomite			

<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) <u>7-26-13</u> and this record is true to the best of my knowledge and belief.	
Kansas Water Well Contractor's License No. <u>732</u> This Water Well Record was completed on (mo/day/year) <u>8/9/13</u>	
under the business name of <u>G.B. Environmental</u> by (signature) <u>James Bullock</u>	
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 785-296-5524. 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 <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a>	