# 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: WASHINGTON | Fraction: ¼ NW ¼ SE ¼ NW ¼ | Section Number: 24 | Township Number: T 4 S | Range Number: R 3 ☒ E ☐ W

**2 WELL OWNER:** Last Name _____ First _____
Business: OHLOE DAIRY
Address: 1814 9TH ROAD
Address _____
City: LINN State: KS ZIP: 66953

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: ☒

**3 LOCATE WELL WITH "X" IN SECTION BOX:** N / W / E / S; NW, NE, SW, SE; |---------| mile |---------|

**4 DEPTH OF COMPLETED WELL:** 118 ft.
Depth(s) Groundwater Encountered: 1) _____ ft. 2) _____ ft. 3) _____ ft., or 4) ☐ Dry Well
WELL'S STATIC WATER LEVEL: 34 ft.
☒ below land surface, measured on (mo-day-yr) 5/1/2018
☐ 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: 300 gpm
Bore Hole Diameter: 18 in. to 118 ft. and _____ in. to _____ ft.

**5 Latitude:** _____ (decimal degrees)
**Longitude:** _____ (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: ☐ Household ☐ Lawn & Garden ☒ Livestock
2. ☐ Irrigation
3. ☐ Feedlot
4. ☐ Industrial
5. ☐ Public Water Supply: well ID _____
6. ☐ Dewatering: how many wells? _____
7. ☐ Aquifer Recharge: well ID _____
8. ☐ Monitoring: well ID _____
9. Environmental Remediation: well ID _____ ☐ Air Sparge ☐ Soil Vapor Extraction ☐ Recovery ☐ Injection
10. ☐ Oil Field Water Supply: lease _____
11. Test Hole: well ID _____ ☐ Cased ☐ Uncased ☐ Geotechnical
12. Geothermal: how many bores? _____ a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water
13. ☐ Other (specify): _____

**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 12 in. to 78 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
Casing height above land surface 18 in. Weight 10.3 lbs./ft. Wall thickness or gauge No. 0.406

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 78 ft. to 118 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From 25 ft. to 118 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

**9 GROUT MATERIAL:** ☐ Neat cement ☒ Cement grout ☒ ~~Bentonite~~ ☐ Other _____
Grout Intervals: From 0 ft. to 25 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

**Nearest source of possible contamination:**
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage
☐ Sewer Lines ☐ Cess Pool ☒ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well
☐ Other (Specify) _____
Direction from well? WEST Distance from well? 100 ft.

| 10 FROM | TO | LITHOLOGIC LOG | FROM | TO | LITHO. LOG (cont.) or PLUGGING INTERVALS |
|---|---|---|---|---|---|
| 0 | 4 | TOPSOIL | | | |
| 4 | 23 | ORANGE SANDY CLAY | | | |
| 23 | 50 | SANDSTONE (YELLOW) | | | |
| 50 | 60 | SANDSTONE (TAN) | | | |
| 60 | 80 | SANSTONE & CLAY | | | |
| 80 | 109 | SANDSTONE (TAN) | | | |
| 109 | 113 | GRAY SHALE | | | Notes: |
| 113 | 116 | LIMESTONE | | | |
| 116 | 118 | GRAY SHALE | | | |

**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) 5/1/2018 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 518 This Water Well Record was completed on (mo-day-year) 5/12/2018 under the business name of BLUE VALLEY DRILLING INC 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**