

**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources; App. No.  

**1 LOCATION OF WATER WELL:**  
 County: Atchison Fraction SE 1/4 SW 1/4 SE 1/4 Section Number 36 Township Number T 5 S Range Number R 20 W  
 Distance and direction from nearest town or city street address of well if located within city? 603 5th St **Global Positioning Systems** (decimal degrees, min. of 4 digits)  
 Latitude: 39.56736  
 Longitude: 95.11907  
 Elevation: 915  
 Datum: NAD 83  
 Data Collection Method: Hand held

**2 WATER WELL OWNER:** Willie Geisendorf  
 RR#, St. Address, Box # : 603 5th St  
 City, State, ZIP Code : Atchison, KS

**3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:**

	NW	NE	
W			E
	SW	SE	
		X	
			S

**4 DEPTH OF COMPLETED WELL** ..... 250 ..... ft.  
 Depth(s) Groundwater Encountered (1).....   ..... ft. (2).....   ..... ft. (3).....   ..... ft.  
 WELL'S STATIC WATER LEVEL.....   ..... ft. below land surface measured on mo/day/yr.....   .....  
 Pump test data: Well water was.....   .....ft. after.....   ..... hours pumping.....   ..... gpm  
 Est. Yield.....gpm: Well water was.....   .....ft. after.....   ..... hours pumping.....   ..... gpm  
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well  
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)  
 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well Ground source  
 Was a chemical/bacteriological sample submitted to Department? Yes ..... No X...; If yes, mo/day/yr  
 Sample was submitted..... Water well disinfected? Yes ..... No X...

**5 TYPE OF CASING USED:** 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued..... Clamped.....  
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded  
 2 PVC 4 ABS 7 Fiberglass HDPE Threaded.....  
 Blank casing diameter 3/4 in. to 6-250 ft., Diameter..... in. to ..... ft., Diameter..... in. to ..... ft.  
 Casing height above land surface..... 60 in., Weight ..... lbs./ft. Wall thickness or guage No. SPR 11  
 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)  
 SCREEN OR PERFORATION OPENINGS ARE:  
 1 Continuous slot 3 Mill slot 5 Gauzed 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..... ft. to ..... ft., From..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From..... ft. to ..... ft., From..... ft. to ..... ft.

**6 GROUT MATERIAL:** 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....  
 Grout Intervals: From 250 ft. to 0 ft., From..... ft. to ..... ft., From..... ft. to ..... ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide storage 16 Other (specify below)  
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well House  
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/gas well  
 Direction from well? South How many feet? 30

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	42	Clay			
42	59	Gravel med to extra large			
59	105	Limestone			
105	110	Grey shale			
110	123	Limestone			
123	175	Alt shale			
175	181	Limestone			
181	250	Alt Shale			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 3/5/09 and this record is true to the best of my knowledge and belief.  
 Kansas Water Well Contractor's License No. 760 This Water Well Record was completed on (mo/day/year) 3/9/09  
 under the business name of ASSOCIATED DRILLING INC by (signature) [Signature]

**INSTRUCTIONS:** Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline 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 one 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/index.html>.