

**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources App. No.  

<b>1 LOCATION OF WATER WELL:</b> County: <b>Wyandotte</b>	Fraction <b>SW ¼ NE ¼ NE ¼ NW ¼</b>	Section Number <b>33</b>	Township No. <b>T 10 S</b>	Range Number <b>R 23</b> <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"/> <b>11711 Leavenworth Road, Kansas City, Kansas 66109</b>		Global Positioning System (GPS) information: Latitude: ..... (in decimal degrees) Longitude: ..... (in decimal degrees) Elevation: ..... Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model: .....) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m		
<b>2 WATER WELL OWNER:</b> <b>Mike Jacobi</b> RR#, Street Address, Box #: <b>5249 N. 109th Street</b> City, State, ZIP Code : <b>Kansas City, KS 66109</b>				

<b>3 LOCATE WELL WITH AN "X" IN SECTION BOX:</b> N  S  -----1 mile-----	<b>4 DEPTH OF COMPLETED WELL</b> <i>Plugged</i> ..... <b>400</b> ..... ft. <i>2-400' bores</i> Depth(s) Groundwater Encountered (1) <b>0</b> ..... ft. (2) ..... ft. (3) ..... ft. WELL'S STATIC WATER LEVEL <i>None</i> ..... ft. below land surface measured on mo/day/yr ..... Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm EST. YIELD <b>0</b> ..... gpm. Well water was ..... ft. after ..... hours pumping ..... gpm Bore Hole Diameter <b>6</b> ..... in. to <b>400</b> ..... ft., and ..... in. to ..... ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input checked="" 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 type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well <input checked="" type="checkbox"/> closed loop 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	--

**5 TYPE OF CASING USED:**  Steel  PVC  Other **H.D. Polyethylene** .....

CASING JOINTS:  Glued  Clamped  Welded  Threaded  
Casing diameter **1** ..... in. to **400** ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
Casing height above land surface **36** ..... in., Weight **SDR11** ..... lbs./ft., Wall thickness or gauge No. **160 PSI** .....

TYPE OF SCREEN OR PERFORATION MATERIAL: *None*  
 Steel  Stainless Steel  PVC  Other (Specify) **None** .....

Brass  Galvanized Steel  None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: *None*  
 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 ..... ft. to ..... ft., From ..... ft. to ..... ft.  
From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
GRAVEL PACK INTERVALS: From ..... ft. to ..... 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 **400** ..... ft. to **3** ..... 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 ..... *West* ..... Distance from well **150'** .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
000	004	soil & clay 092-096 shale	194	201	shale
004	005	sandstone 096-102 lime	201	212	lime
005	010	clay 102-104 shale	212	240	shale
010	014	sandstone 104-110 lime	240	255	lime 400'-3' (2-400' bores
014	019	shale 110-133 shale	255	262	shale Plugged with High
019	022	lime 133-163 lime	262	298	lime Solid Bentonite)
022	045	shale 163-166 shale	298	300	shale
045	056	lime 166-170 lime	300	316	lime
056	086	shale 170-186 shale	316	400	shale
086	092	lime 186-194 lime			

**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) **3/27/2013** ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **561** ..... This Water Well Record was completed on (mo/day/year) **3/27/2013** ..... under the business name of **Evans Energy Development** ..... 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 three copies (white, blue, pink) 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 <http://www.kdheks.gov/waterwell/index.html>.