

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. []

1 LOCATION OF WATER WELL: Fraction SW ¼ SE ¼ NE ¼ County: Atchison Distance and direction from nearest town or city street address of well if located within city? 1014 Gasoline Alley, Atchison KS		Section Number 1 Township Number T 6 S R 20 E Global Positioning System (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____																																																												
2 WATER WELL OWNER: Consumer Oil RR#, St. Address, Box #: 1014 Gasoline Alley City, State, ZIP Code: Atchison KS																																																														
3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX: <div style="border: 1px solid black; padding: 5px; margin: 10px auto; width: 100px; text-align: center;"> N NW — NE — X — SW — SE S </div>	4 DEPTH OF COMPLETED WELL 30.20 ft. MW2 Depth(s) Groundwater Encountered1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL NA 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: 1 Domestic 3 Feed lot 6 Oil field water supply 8 Air conditioning 11 Injection well 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) ⑩ Monitoring well 12 Other (Specify below) _____ 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: 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) _____ ② PVC 4 ABS 7 Fiberglass _____ Blank casing diameter 2 in. to 15.20 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height below land surface _____ ft., Weight _____ lbs./ft. Wall thickness or gauge No. _____ 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 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 15.20 ft. to 30.20 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 13 ft. to 30.61 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.																																																													
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout ③ Bentonite ④ Other Concrete: 0-1ft Grout Intervals From 1 ft. to 13 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 _____ 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well _____ Direction from well? SW How many feet? ~140ft																																																														
<table border="1"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>15</td> <td>Brown silty clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>15</td> <td>30.61</td> <td>Black silty clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	15	Brown silty clay				15	30.61	Black silty clay																																														Flushmount waiver from BOW
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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) 8/14/13 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 12/26/13 under the business name of Larsen & Associates, Inc. by (signature) _____																																																														

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 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.