

**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources: App. No.  

<b>1 LOCATION OF WATER WELL:</b>	Fraction County: <b>Jackson</b> <b>NE ¼   SE ¼   SW ¼</b>	Section Number <b>3</b>	Township Number <b>T 7 S</b>	Range Number <b>R 15 E</b>
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Distance and direction from nearest town or city street address of well if located within city? **5<sup>th</sup> and New Jersey, Holton KS**      **Global Positioning System** (decimal degrees, min. of 4 digits)  
 Latitude: N 39.46528°  
 Longitude: W 95.73086°  
 Elevation: 1065.39 pin/ 1065.11 toc  
 Datum: above mean sea level  
 Data Collection Method: legal survey

**2 WATER WELL OWNER:** **Symons Truck & Tractor**  
 RR#, St. Address, Box # : **5<sup>th</sup> and New Jersey**  
 City, State, ZIP Code : **Holton, KS**

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

N
NW      NE
W      E
SW      SE
S

**4 DEPTH OF COMPLETED WELL** 33 ft.  
**MW9R**  
 Depth(s) Groundwater Encountered 1 \_\_\_\_\_ ft. 2 \_\_\_\_\_ ft. 3 \_\_\_\_\_ ft.  
 WELL'S STATIC WATER LEVEL 26.11 ft. below land surface measured on mo/day/yr 7/13/07  
 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 Feed lot    6 Oil field water supply    9 Dewatering    12 Other (Specify below)  
 2 Irrigation    4 Industrial    7 Domestic (lawn & garden)    **10 Monitoring well**  
 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    \_\_\_\_\_ Threaded **X**  
 Blank casing diameter 2 in. to 18 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height below land surface 0.28 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 Guaze 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 18 ft. to 33 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
**GRAVEL PACK INTERVALS:** From 17 ft. to 33 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 cement, 0-2 ft.**  
 Grout Intervals From 2 ft. to 17 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? \_\_\_\_\_ How many feet? \_\_\_\_\_

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Gravel and Clay fill			
5	22	Clay, red-brown, high plasticity			
22	24	Sand, well sorted, fine, with clay			
24	27	Clay content increasing with depth.			
		Saturated at 28'			
27	30	Sandy clay, gray-brown, saturated			
30	33	Shale clay			
					<b>Flushmount waiver from BOW</b>

**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) 7/13/07 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) 7/20/07 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>.