

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:
 County: POTAWATOMIE Fraction NW 1/4 NW 1/4 SE 1/4 Section Number 29 Township Number T 8 S 8 Range Number R 9 E W
 Distance and direction from nearest town or city street address of well if located within city? 10750 FLUSH RD **Global Positioning Systems** (decimal degrees, min. of 4 digits)
 Latitude: 39 19.573
 Longitude: 96 26.247
 Elevation: _____ Datum: _____ Data Collection Method: _____

2 WATER WELL OWNER: LARRY BACH
 RR#, St. Address, Box # : 10750 FLUSH RD
 City, State, ZIP Code : WESTMORELAND, KS. 66549

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

	NW	NE	
W			E
	SW	SE	
	S		

4 DEPTH OF COMPLETED WELL 200 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 CLOSED. NO OP. WATER
 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 X.....
 2 PVC 4 ABS 7 Fiberglass HDPF Threaded.....
 Blank casing diameter 3/4 in. to 200 ft., Diameter. _____ in. to _____ ft., Diameter _____ in. to _____ ft.
 Casing height above land surface 60 in., Weight..... lbs./ft. Wall thickness or gauge No. SDR11
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)

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
 Grout Intervals: From 5 ft. to 200 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 6 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 HOUSE
 Direction from well? EAST How many feet? 21

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	31	CLAY			
31	36	LEIMSTONE			
36	65	SHALE, GRAY TO RED TO GRAY			
65	69	LEIMSTONE			
69	175	SHALE, ALTERNATING COLORS			
175	181	LEIMSTONE			
181	200	SHALE, GRAY			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This well was 2 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 9/19/06 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) 10/19/06 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.kdhe.state.ks.us/geo/waterwells>.