

W114 #2

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

**1 LOCATION OF WATER WELL:** Fraction NW 1/4 NW 7/8 SW 1/4 1/4 Section Number 5 Township No. T 9 S Range Number R 13 E  W

County: Jackson Co

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here   
From Ernest Co 1/2 mile south on 63 Hwy to Crystal Springs Rd then go 3 1/2 miles east on rd through Co 1/2 mile south on east

**2 WATER WELL OWNER:** Chris Johnson  
 RR#, Street Address, Box #: P.O. Box 207  
 City, State, ZIP Code: St. Marys, MO 66536

**Global Positioning System (GPS) information:**  
 Latitude: ..... (in decimal degrees)  
 Longitude: ..... (in decimal degrees)  
 Elevation: .....  
 Datum:  WGS 84,  NAD 83,  NAD 27  
 Collection Method:  
 GPS unit (Make/Model: .....)  
 Digital Map/Photo,  Topographic Map,  Land Survey  
 Est. Accuracy:  <3 m,  3-5 m,  5-15 m,  >15 m

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

	NW	NE	
W	X		E
	SW	SE	
	S		

-----1 mile-----

**4 DEPTH OF COMPLETED WELL** ..... ft. 100'  
 Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.  
 WELL'S STATIC WATER LEVEL 29' ft. below land surface measured on mo/day/yr.....  
 Pump test data: Well water was..... ft. after..... hours pumping..... gpm  
 EST. YIELD 2.5 gpm Well water was..... ft. after..... hours pumping..... gpm  
 Bore Hole Diameter 9 in. to 100 ft., and..... in. to..... ft.  
 WELL WATER TO BE USED AS:  Public water supply  Geothermal  Injection well  
 Domestic  Feedlot  Oil field water supply  Dewatering  Other (Specify below)  
 Irrigation  Industrial  Domestic-lawn & garden  Monitoring well  
 Was a chemical/bacteriological sample submitted to Department?  Yes  No  
 If yes, mo/day/yr sample was submitted.....  
 Water well disinfected?  Yes  No

**5 TYPE OF CASING USED:**  Steel  PVC  Other.....  
 CASING JOINTS:  Glued  Clamped  Welded  Threaded  
 Casing diameter 5 in. to 80 ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft.  
 Casing height above land surface..... in., Weight 50 lbs./ft., Wall thickness or gauge No. ....  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 Steel  Stainless Steel  PVC  Other (Specify) .....  
 Brass  Galvanized Steel  None used (open hole)  
 SCREEN OR PERFORATION OPENINGS ARE:  
 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..... 80 ft. to 100 ft., From..... ft. to..... ft.  
 GRAVEL PACK INTERVALS: From..... 25 ft. to 100 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..... 5 ft. to 25 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 pond  
 Direction from well..... 100' Distance from well..... N.E.

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	1	Top Soil	69	85	Brown shale
1	19	Brown Clay	85	94	limestone
14	28	yellow shale	94	100	gray clay shale
28	32	limestone			
33	45	gray clay shale			
45	48	limestone			
49	53	gray clay shale			
53	58	limestone			
58	69	brown shale			
69	69	limestone			

**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) 7/15/2013 and this record is true to the best of my knowledge and belief.  
 Kansas Water Well Contractor's License No. 451 This Water Well Record was completed on (mo/day/year) 8/8/2013  
 under the business name of Haldeman Well Drilling by (signature) Gregory H. Haldeman

**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>.