

mw-14
WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Rush 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"/> . 500 200 feet south & ¹⁰ 5 feet ^{east} west of the intersection of Hwy K-4 & Oak Elm Street, LaCrosse,	Fraction $\frac{1}{4}$ NE $\frac{1}{4}$ NE $\frac{1}{4}$ NE $\frac{1}{4}$	Section Number 33	Township No. T 17 S	Range Number R 18 <input type="checkbox"/> E <input checked="" type="checkbox"/> W																				
2 WATER WELL OWNER: RR#, Street Address, Box #: <i>Dr. Shelly Oelke</i> City, State, ZIP Code: <i>2307 Hwy 183 LaCrosse, KS 67548</i>																								
3 LOCATE WELL WITH AN "X" IN SECTION BOX: <div style="display: flex; align-items: center; justify-content: center;"> <div style="text-align: center; margin-right: 10px;"> N <table border="1" style="border-collapse: collapse; text-align: center;"> <tr><td></td><td></td><td></td><td>X</td></tr> <tr><td>--NW--</td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> <tr><td>--SW--</td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> </table> </div> <div style="text-align: center; margin-left: 10px;"> E S 1 mile </div> </div>								X	--NW--								--SW--							
			X																					
--NW--																								
--SW--																								
4 DEPTH OF COMPLETED WELL <i>27</i> ft. Depth(s) Groundwater Encountered (1) <i>20</i> 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 Bore Hole Diameter <i>8.25</i> in. to ft., and in. to ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input 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 checked="" type="checkbox"/> Monitoring well 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: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Threaded Casing diameter <i>2</i> in. to <i>17</i> ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface <i>0</i> in., Weight lbs./ft., Wall thickness or gauge No. <i>sch 40</i> TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous slot <input checked="" type="checkbox"/> Mill slot <input type="checkbox"/> Gauze wrapped <input type="checkbox"/> Torch cut <input type="checkbox"/> Drilled holes <input type="checkbox"/> None (open hole) <input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input type="checkbox"/> Wire wrapped <input type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify) SCREEN-PERFORATED INTERVALS: From <i>17</i> ft. to <i>27</i> ft., From ft. to ft. From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From <i>15</i> ft. to <i>27</i> ft., From ft. to ft. From ft. to ft., From ft. to ft.																								
6 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other Grout Intervals: From <i>0</i> ft. to <i>15</i> ft., From ft. to ft., From ft. to ft. What is the nearest source of possible contamination: <input type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Livestock pens <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Other (specify below) <input type="checkbox"/> Sewer lines <input type="checkbox"/> Cesspool <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Fuel storage <input type="checkbox"/> Abandoned water well <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Seepage pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Oil well/gas well Direction from well Distance from well																								
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS																			
0	1	Topsoil, dark red brown, firm,			sandy, trace gravel, saturated																			
		moist																						
1	4	Silty clay, red brown, stiff, damp																						
4	7	Silt, light redbrown, clayey,																						
		slightly sandy, damp																						
7	18	Silty clay, redbrown, very stiff,																						
		damp																						
18	22	Silty clay, light redbrown, stiff,																						
		moist, grading shale																						
22	27	Shale, yellow brown, very weathered																						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) <i>6/3/2014</i> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <i>604</i> This Water Well Record was completed on (mo/day/year) <i>6/13/14</i> under the business name of <i>Environmental Priority Service, Inc.</i> by (signature) <i>ptia mt</i> INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send one copy 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																								