WATER WELL RECORD Form WWC-5

■ Original Record ☐ Correction ☐ Change in Well Use

Division of Water Resources App. No. ____ Well ID ____

1 LOCATION OF WATER WELL: County: Stafford	Fraction	Section Number	Township Number	Range Number
	¼ SE ¼ NW ¼ NW ¼	1	T 23 S	R 13 ☐ E ■ W

2 WELL OWNER: Last Name: Long First: Jerry
Business:
Address: 991 NE 10th Avenue
Address:
City: St. John State: KS ZIP: 67576

Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: ☐
1 1/4 South, 2 1/2 West of Hudson

3 LOCATE WELL WITH "X" IN SECTION BOX:

N
NW: X | NE
W | E
SW | SE
S
|--------1 mile--------|

4 DEPTH OF COMPLETED WELL: 40 ft.
Depth(s) Groundwater Encountered: 1) ..... ft. 2) ..... ft. 3) ..... ft., or 4) ☐ Dry Well
WELL'S STATIC WATER LEVEL: 3 ft.
■ below land surface, measured on (mo-day-yr) 9-6-19
☐ above land surface, measured on (mo-day-yr) .....
Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm
Well water was ..... ft. after ..... hours pumping ..... gpm
Estimated Yield: ..... gpm
Bore Hole Diameter: 10 in. to 40 ft. and ..... in. to ..... ft.

5 Latitude: 38.08402 (decimal degrees)
Longitude: 98.70768 (decimal degrees)
Horizontal Datum: ☐ WGS 84 ■ NAD 83 ☐ NAD 27
Source for Latitude/Longitude:
■ GPS (unit make/model: .....) (WAAS enabled? ☐ Yes ☐ No)
☐ Land Survey ☐ Topographic Map
☐ Online Mapper: .....

6 Elevation: ..... ft. ☐ Ground Level ☐ TOC
Source: ☐ Land Survey ■ GPS ☐ Topographic Map ☐ Other .....

7 WELL WATER TO BE USED AS:
1. Domestic: ☐ Household ☐ Lawn & Garden ■ Livestock
2. ☐ Irrigation
3. ☐ Feedlot
4. ☐ Industrial
5. ☐ Public Water Supply: well ID .....
6. ☐ Dewatering: how many wells? .....
7. ☐ Aquifer Recharge: well ID .....
8. ☐ Monitoring: well ID .....
9. Environmental Remediation: well ID ..... ☐ Air Sparge ☐ Soil Vapor Extraction ☐ Recovery ☐ Injection
10. ☐ Oil Field Water Supply: lease .....
11. Test Hole: well ID ..... ☐ Cased ☐ Uncased ☐ Geotechnical
12. Geothermal: how many bores? ..... a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water
13. ☐ Other (specify): .....

Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted: .....
Water well disinfected? ■ Yes ☐ No

8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other ..... CASING JOINTS: ■ Glued ☐ Clamped ☐ Welded ☐ Threaded
Casing diameter 5 in. to 40 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.
Casing height above land surface 18 in. Weight SDR-26 lbs./ft. Wall thickness or gauge No. .....
TYPE OF SCREEN OR PERFORATION MATERIAL:
☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify) .....
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) .....
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ■ Saw Cut ☐ None (Open Hole)
SCREEN-PERFORATED INTERVALS: From 40 ft. to 20 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From 40 ft. to 15 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ■ Bentonite ☐ Other .....
Grout Intervals: From ..... ft. to ..... ft., From 15 ft. to 0 ft., From ..... ft. to ..... ft.
Nearest source of possible contamination:
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well
■ Other (Specify) Creek
Direction from well? South Distance from well? 1010ft ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Top soil			
2	21	Clay			
21	40	Gray sand & gravel			
			Notes:		

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ■ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo-day-year) 9-6-19 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134 This Water Well Record was completed on (mo-day-year) 10-9-19 under the business name of Rosencrantz-Bemis Ent Inc Signature [signature]

Mail 1 white copy along with a fee of $5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.