

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:		Fraction		Section Number	Township Number	Range Number																																																																								
County: Finney		NW ¼ SW ¼ SW ¼		16	T 24 S	R 32 W																																																																								
Distance and direction from nearest town or city street address of well if located within city? Hwy 50 & Campus Dr., Garden City, KS 67846				Global Positioning System (decimal degrees, min. of 4 digits)																																																																										
				Latitude: N 37.96244°																																																																										
				Longitude: W 100.84622°																																																																										
				Elevation: RIM: 2825.56; TOC: 2825.24																																																																										
				Datum: WGS84																																																																										
				Data Collection Method: legal survey																																																																										
2 WATER WELL OWNER: KDHE		3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:																																																																												
RR#, St. Address, Box # : 1000 SW Jackson																																																																														
City, State, ZIP Code : Topeka, KS 66612		4 DEPTH OF COMPLETED WELL 73 ft.																																																																												
<div style="text-align: center;"> N S </div>		LOCATOR																																																																												
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.																																																																												
		WELL'S STATIC WATER LEVEL 56.92 ft. below land surface measured on mo/day/yr 5/26/11																																																																												
		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:																																																																														
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below)																																																																														
2 PVC 4 ABS 7 Fiberglass																																																																														
Blank casing diameter 4 in. to 13 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.																																																																														
Casing height below land surface 0.32 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 Gauze 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 13 ft. to 73 ft. From _____ ft. to _____ ft.																																																																														
From _____ ft. to _____ ft. From _____ ft. to _____ ft.																																																																														
GRAVEL PACK INTERVALS:																																																																														
From 11 ft. to 78 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 Concrete: 0-2 ft																																																																														
Grout Intervals From 2 ft. to 8 ft. From 8 ft. to 11 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? W How many feet? ~75 ft																																																																														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>0.5</td> <td>Concrete</td> <td></td> <td></td> <td></td> </tr> <tr> <td>0.5</td> <td>5</td> <td>Brown to orange brown silty clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>5</td> <td>15</td> <td>Very fine-med, coarser w/ depth, brown sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>15</td> <td>59</td> <td>Coarse brown sand, cobbles & gravel</td> <td></td> <td></td> <td></td> </tr> <tr> <td>59</td> <td>78</td> <td>Coarse sand with gravel & cobbles</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>							FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	0	0.5	Concrete				0.5	5	Brown to orange brown silty clay				5	15	Very fine-med, coarser w/ depth, brown sand				15	59	Coarse brown sand, cobbles & gravel				59	78	Coarse sand with gravel & cobbles																																							
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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) 5/26/11 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) 6/22/11 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 .																																																																														