

WATER WELL RECORD Form WWC-5

☒ Original Record ☐ Correction ☐ Change in Well UseDivision of Water
Resources App. No.

Well ID

1 LOCATION OF WATER WELL: County: <u>Sedgwick</u>		Fraction: <u>1/4 NW 1/4 NW 1/4 NE 1/4</u>	Section Number: <u>24</u>	Township Number: <u>T 27 S</u>	Range Number: <u>R 3 E 1 W</u>																																	
2 WELL OWNER: Last Name: <u>Storg</u> First: <u>John</u> Business: _____ Address: <u>25519 W Hwy 54</u> Address: _____ City: <u>Garden Plain</u> State: <u>Ko</u> ZIP: _____		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: ☒																																				
3 LOCATE WELL WITH "X" IN SECTION BOX: 	4 DEPTH OF COMPLETED WELL: <u>80</u> ft. Depth(s) Groundwater Encountered: 1) _____ ft. 2) _____ ft. 3) _____ ft., or 4) ☐ Dry Well WELL'S STATIC WATER LEVEL: <u>33</u> ft. ☐ below land surface, measured on (mo-day-yr) _____ ☐ 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: <u>12</u> gpm Bore Hole Diameter: _____ in. to _____ ft. and _____ in. to _____ ft.		5 Latitude: _____ (decimal degrees) Longitude: _____ (decimal degrees) 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 <u>5</u> in. to <u>80</u> ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft. Casing height above land surface <u>160</u> in. Weight <u>160</u> lbs./ft. Wall thickness or gauge No. <u>26</u> 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 _____ ft. to <u>80</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From <u>24</u> ft. to <u>80</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.																																						
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other _____ Grout Intervals: From <u>4</u> ft. to <u>24</u> ft., From _____ ft. to _____ 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) _____ Direction from well? <u>West</u> Distance from well? <u>200</u> ft.																																						
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>10 FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>LITHO. LOG (cont.) or PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>2</td> <td rowspan="4" style="text-align: center; vertical-align: middle;"> <u>Top Soil</u> <u>Clay</u> <u>Med sand</u> <u>Shale</u> </td> <td></td> <td></td> <td></td> </tr> <tr> <td>2</td> <td>23</td> <td></td> <td></td> <td></td> </tr> <tr> <td>23</td> <td>33</td> <td></td> <td></td> <td></td> </tr> <tr> <td>33</td> <td>80</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="6" style="height: 40px;">Notes:</td> </tr> </tbody> </table>						10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS	0	2	<u>Top Soil</u> <u>Clay</u> <u>Med sand</u> <u>Shale</u>				2	23				23	33				33	80				Notes:					
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11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo-day-yr) <u>8/21/13</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>611</u> This Water Well Record was completed on (mo-day-yr) <u>9/1/13</u> under the business name of <u>Chase Drilling</u>																																						

INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) 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) 296-3565.

Visit us at <http://www.kdheks.gov/waterwell/index.html>

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