

WATER WELL RECORD

Form WWC-5

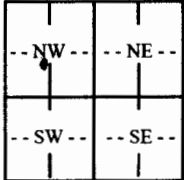
Division of Water Resources App. No.

47,757

1 LOCATION OF WATER WELL: County: Sedgwick Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ From Cheney 3 1/2 S 2 1/4 E ESR	Fraction NE 1/4 NE 1/4 SW 1/4 NW 1/4	Section Number 35	Township No. T 28 S	Range Number R 4 ☐ E ☒ W
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Global Positioning System (GPS) information:
 Latitude: **37.571667** (in decimal degrees)
 Longitude: **097.73040** (in decimal degrees)
 Elevation: _____
 Datum: ☐ WGS 84, ☐ NAD 83, ☒ NAD 27
 Collection Method:
☒ GPS unit (Make/Model: **garmin csx**)
☐ Digital Map/Photo, ☒ Topographic Map, ☐ Land Survey
 Est. Accuracy: ☐ <3 m, ☒ 3-5 m, ☐ 5-15 m, ☐ >15 m

2 WATER WELL OWNER: John Blocker RR#, Street Address, Box #: 13310 E. Pleasant Valley Rd. City, State, ZIP Code: Haven, Kansas 67543	4 DEPTH OF COMPLETED WELL 40 ft. Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL 15 ft. below land surface measured on mo/day/yr. 10-6-2011 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 30 in. to 40 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
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3 LOCATE WELL WITH AN "X" IN SECTION BOX:


N

S

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

5 TYPE OF CASING USED: ☐ Steel ☒ PVC ☐ Other _____
CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded
 Casing diameter **16** in. to **25** ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
 Casing height above land surface **24** in., Weight **SCH 40** lbs./ft., Wall thickness or gauge No. **500**
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 **25** ft. to **40** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From **40** ft. to **17** 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 **17** ft. to **0** 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 **None**
 Direction from well _____ Distance from well _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	3	Sandy Top Soil			
3	11	Brown Silty Clay			
11	17	Brown Silty Clay and Fine Sand			
17	33	Med. to Sm. Sand w/pcs. of			
		Red and Green Shale			
33	39	Med. to Coarse Sand w/pcs. of			
		Red and Green Shale			
39	40	Red Bed			

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) **10-6-2011** 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) **10-14-2011**
 under the business name of **Rosencrantz- Bemis Enterprise** by (signature) *Samuel A. Wlodan*

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 785-296-5522. 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>.