

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No. **MW-1****1 LOCATION OF WATER WELL:**County: **Gray** Fraction **SW** $\frac{1}{4}$ NW $\frac{1}{4}$ SE $\frac{1}{4}$ NW $\frac{1}{4}$ Section Number **8**Township Number **T 29 S**Range Number **R 30** ☐ E ☒ WStreet/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐.**100 Sante Fe, Copeland, Kansas****2 WATER WELL OWNER: KDHE T & M**

RR#, St. Address, Box # : 1000 SW Jackson

City, State, ZIP Code : Topeka, KS

Global Positioning System (GPS) information:

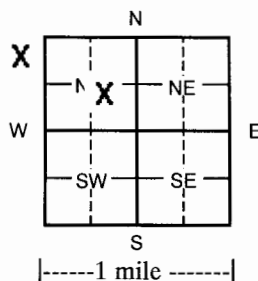
Latitude: _____ (in decimal degrees)

Longitude: _____ (in decimal degrees)

Elevation: _____

Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27

Collection Method:

☐ GPS unit (Make/Model: _____)☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land SurveyEst. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m**3 LOCATE WELL WITH AN "X" IN SECTION BOX:****4 DEPTH OF COMPLETED WELL****260** ft.

Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.

WELL'S STATIC WATER LEVEL **NA** 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

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 wellWas a chemical/bacteriological sample submitted to Department? ☐ Yes ☒ No

If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? ☐ Yes ☒ No**5 TYPE OF CASING USED:**☐ Steel ☒ PVC ☐ OtherCASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ☐ ThreadedCasing diameter **4** in. to **210** ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.Casing height above land surface **0** in., Weight **2.07** lbs./ft. Wall thickness or gauge No. **.237**

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 **210** ft. to **260** ft., From _____ ft. to _____ ft.

From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From **207** ft. to **260** ft., From _____ ft. to _____ ft.

From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL:☐ Neat cement ☒ Cement grout ☒ Bentonite ☐ OtherGrout Intervals From **0** ft. to **2** ft. From **2** ft. to **207** 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**Contaminated site**

Direction from well _____ Distance from well _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	3	Gravel			
3	60	Clay sandy, light brown, fine-medium gr			
60	72	Sand, light brown, fine-medium grain			
72	84	Clay sandy, light brown, fine-medium			
84	103	Sand trace clay, light brown, fine-med gr			
103	244	Sand, light brown, med-coarse grain			
244	252	Sand, light brown, coarse grain			
252	260	Weathered shale			

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) **12/17/09** and this record is true to the best of my knowledge and belief.Kansas Water Well Contractor's License No. **554 or 783**This Water Well Record was completed on (mo/day/year) **1/12/09**under the business name of **Woofert Pump & Well, Inc** by (signature) _____**INSTRUCTIONS:** 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 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>.