

## WATER WELL RECORD

## Form WWC-5

Division of Water Resources; App. No.

<b>1 LOCATION OF WATER WELL:</b>		Fraction		Section Number	Township Number	Range Number
County: <b>Stanton</b>		n/c ¼ SE ¼ SE ¼		<b>25</b>	T <b>29</b> S	R <b>40</b> E/W
Distance and direction from nearest town or city street address of well if located within city? <b>5East, 4 ¾ South of Johnson KS</b>				<b>Global Positioning System</b> (decimal degrees, min. of 4 digits)		
<b>2 WATER WELL OWNER: Judy Whipple</b> RR#, St. Address, Box # : <b>5900 South Rd F</b> City, State, ZIP Code : <b>Johnson KS 67855</b>				Latitude: _____		
				Longitude: _____		
				Elevation: _____		
				Datum: _____		
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>				Data Collection Method: _____		
		<b>4 DEPTH OF COMPLETED WELL 420 ft.</b>				
		Depth(s) Groundwater Encountered <b>1 294</b> ft. <b>2</b> ft. <b>3</b> ft.				
		WELL'S STATIC WATER LEVEL <b>294</b> 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: 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 <b>x</b> ; If yes, mo/day/yr				
		Sample was submitted _____ Water Well Disinfected? Yes <b>x</b> No _____				
<b>5 TYPE OF CASING USED:</b>						
1 Steel		3 RMP (SR)		5 Wrought Iron		8 Concrete tile
2 PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)
				7 Fiberglass		<b>Eagle-Loc</b>
Blank casing diameter <b>5</b> in. to <b>420</b> ft., Dia						Threaded _____
Casing height above land surface <b>12</b> in., Weight _____						lbs./ft. Wall thickness or gauge No. <b>SDR 21&amp; 17</b>
TYPE OF SCREEN OR PERFORATION MATERIAL:						
1 Steel		3 Stainless steel		5 Fiberglass		7 PVC
2 Brass		4 Galvanized steel		6 Concrete tile		8 RM (SR)
						9 ABS
						11 Other (specify) _____
						12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:						
1 Continuous slot		3 Mill slot		5 Gauze wrapped		7 Torch cut
2 Louvered shutter		4 Key punched		6 Wire wrapped		8 Saw Cut
						9 Drilled holes
						11 None (open hole)
SCREEN-PERFORATED INTERVALS:						
From <b>320</b> ft. to <b>340</b> ft.		From <b>360</b> ft. to <b>380</b> ft.				
From <b>400</b> ft. to <b>420</b> ft.		From _____ ft. to _____ ft.				
GRAVEL PACK INTERVALS:		From <b>25</b> ft. to <b>420</b> ft.				
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.				
<b>6 GROUT MATERIAL:</b>						
1 Neat cement		2 Cement grout		3 Bentonite		4 Other _____
Grout Intervals From <b>5</b> ft. to <b>25</b> ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ 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
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage
						13 Insecticide Storage
						14 Abandoned water well
						15 Oil well/ gas well
						16 Other (specify below) _____
Direction from well? _____				How many feet? <b>None observed</b>		
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
0	3	Top soil	400	420	Med sand & clay streaks	
3	60	Brown clay				
60	120	Fine sand & sandy clay				
120	160	Cemented sand				
160	246	Fine to med sand				
246	278	Brown clay				
278	334	Med sand				
334	350	Brown clay				
350	395	Med sand & clay streaks				
395	400	clay				
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <b>6/13/08</b> and this record is true to the best of my knowledge and belief.						
Kansas Water Well Contractor's License No. <b>473</b> . This Water Well Record was completed on (mo/day/year) <b>6/24/08</b>						
under the business name of <b>Tyler Water Well</b> by (signature) <i>Dan J. H.</i>						
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 <a href="http://www.kdheks.gov/waterwell">http://www.kdheks.gov/waterwell</a> .						

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