

WATER WELL RECORD Form WWC-5

☒ Original Record ☐ Correction ☐ Change in Well Use

Division of Water
Resources App. No.

Well ID

1 LOCATION OF WATER WELL:

County: Barber Fraction NW SE SE 1/4 Section Number 1 Township Number T 30S Range Number R 11 E ☒ W

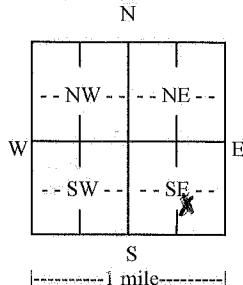
2 WELL OWNER: Last Name: Laicker First: Pauline

Business: 911 Elm St 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: ☐

Address: Medicine Lodge State: KS ZIP 67104 5E Isabel 1 South.

City: Medicine Lodge

3 LOCATE WELL WITH "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL:

Depth(s) Groundwater Encountered: 1) 92 ft.

2) 45 ft. 3) 45 ft. or 4) ☐ Dry Well

WELL'S STATIC WATER LEVEL: 45 ft.

☒ below land surface, measured on (mo-day-yr) 9-11-13

☐ above land surface, measured on (mo-day-yr)

Pump test data: Well water was 409 gpm

after 92 hours pumping

Well water was 409 gpm

after 92 hours pumping

Estimated Yield: 409 gpm

Bore Hole Diameter: 92 in. to 92 ft. and

92 in. to 92 ft.

5 Latitude: 37.11 (decimal degrees)

Longitude: 97.11 (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: 1320 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 diameter 5 in. to 92 ft. Diameter 160 in. to ft. Diameter in. to ft.

Casing height above land surface 24 in. Weight 160 lbs./ft. Wall thickness or gauge No.

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 82 ft. to 92 ft. From ft. to ft. From ft. to ft.

GRAVEL PACK INTERVALS: From 20 ft. to 92 ft. From 75 ft. to 92 ft. From ft. to ft.

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other

Grout Intervals: From 0 ft. to 20 ft. From 15 ft. to 15 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? 5 Distance from well? 1320 ft.

10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS

0	2	Sandy Soil			
2	21	White Clay			
21	26	Silty Fine Sand			
26	34	White Clay			
34	46	Fine Sand			
46	69	Sand			
69	80	Brown Clay			
80	92	Sand			

Notes:

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged

under my jurisdiction and was completed on (mo-day-year) 9-11-13 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's license No. 140 This Water Well Record was completed on (mo-day-year) 9-10-13

under the business name of Lyman's Inc.

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>

KSA 82a-1212

Revised 9/10/2012