WATER WELL RECORD Form WWC-5

Division of Water Resources App. No. _____ Well ID _____

☒ Original Record ☐ Correction ☐ Change in Well Use

1 LOCATION OF WATER WELL: County: Morton	Fraction: SE ¼ SE ¼ SE ¼ SE ¼	Section Number: 9	Township Number: T 31 S	Range Number: R 42 ☐ E ☒ W

2 WELL OWNER: Last Name: O'Bryan First: Stacy
Business:
Address: 970 BB Blvd
Address:
City: Manter State: KS ZIP: 67862

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: ☐
Intersection County Rd 9 & BB Rd, 1½ a mile east, North side of N Rd. 50'

3 LOCATE WELL WITH "X" IN SECTION BOX:

N / W / E / S; NW, NE, SW, SE; X in SE; 1 mile

4 DEPTH OF COMPLETED WELL: 360 ft.
Depth(s) Groundwater Encountered: 1) 150 ft. 2) ..... ft. 3) ..... ft., or 4) ☐ Dry Well
WELL'S STATIC WATER LEVEL: 115 ft.
☒ below land surface, measured on (mo-day-yr) 09-14-2016
☐ 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: 20 gpm
Bore Hole Diameter: 10 ¼ in. to 360 ft. and ..... in. to ..... ft.

5 Latitude: 37.360095 (decimal degrees)
Longitude: 101.883394 (decimal degrees)
Horizontal 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: 3519 ft. ☒ Ground Level ☐ TOC
Source: ☐ Land Survey ☐ GPS ☐ Topographic Map ☒ Other Kolar

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 6 in. to 360 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.
Casing height above land surface 24 in. Weight ..... lbs./ft. Wall thickness or gauge No. SDR 21

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 240 ft. to 360 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From 40 ft. to 360 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other .....
Grout Intervals: From 5 ft. to 40 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? North Distance from well? 300' ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	7	Top Soil, White Hard Rock			Limestone Rock ? White / Red
7	20	White Rock, Caliche			Sandstone
20	30	White / Tan Clay, Caliche Layers	120	150	Gray Sandstone
30	54	Brown Clay, Dark & Light	150	165	Tan Gray Sandstone
54	160	Fine Sand & Soft Tan Clay	165	180	Gray / Blue Clay
160	80	Light Tan Clay w/ Fine Sand Streaks	180	200	Blue Shale
80	100	Light Tan Clay & fine Sand mix			
100	108	Fine Coarse Sand, Small Gravel			
108	120	Yellow / White / Red Clay w/			

Notes: Continued on Page 2.....

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) 09-14-2016 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 846 This Water Well Record was completed on (mo-day-year) 09-28-2016 under the business name of Nash Water Well Service, LLC Signature Katheran L Nash

Mail 1 white copy along with a fee of $5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.

Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 **Revised 7/10/2015**

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☐ Original Record ☐ Correction ☐ Change in Well Use

1 LOCATION OF WATER WELL: County:	Fraction ¼ ¼ ¼ ¼	Section Number	Township Number T S	Range Number R ☐E ☐W

2 WELL OWNER: Last Name: O'Bryan First: Stacy
Business:
Address:
Address:
City: State: 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: N / W / E / S; NW, NE, SW, SE; ←1 mile→

4 DEPTH OF COMPLETED WELL: ..... ft.
Depth(s) Groundwater Encountered: 1) ..... ft. 2) ..... ft. 3) ..... ft., or 4) ☐ Dry Well
WELL'S STATIC WATER LEVEL: ..... 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: .....gpm
Bore Hole Diameter: ..... in. to ..... ft. and ..... in. to ..... ft.

5 Latitude: .....(decimal degrees)
Longitude: .....(decimal degrees)
Horizontal 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 ..... in. to ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.
Casing height above land surface ..... in. Weight ..... 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 ..... ft. to ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other .....
Grout Intervals: From ..... ft. to ..... 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? ..... Distance from well? ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
200	202	Rock			
202	235	Blue Shale			
235	253	Gray Clay w/ Gray Sandstone Streaks			
253	350	Gray Sandstone			
350	356	Red / Gray / Blue Clay			
356	360	Sandstone			
			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) ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ..... This Water Well Record was completed on (mo-day-year) ..... under the business name of ..... Signature .....

Mail 1 white copy along with a fee of $5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.
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