

**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources: App. No. \_\_\_\_\_

**1 LOCATION OF WATER WELL:** Fraction SW ¼ SE ¼ NE ¼ Section Number 29 Township Number T 3 S Range Number R 14 W  
 County: Smith  
 Distance and direction from nearest town or city street address of well if located within city? alley between S. Main & Spruce St., ~140 ft. N. of Railroad Ave. Athol, KS 66932 **Global Positioning System** (decimal degrees, min. of 4 digits)  
 Latitude: N 39.76423°  
 Longitude: W 98.91967°  
 Elevation: RIM: 1789.94 TOC: 1789.64  
 Datum: above mean sea level  
 Data Collection Method: legal survey

**2 WATER WELL OWNER:** Athol Coop.  
 RR#, St. Address, Box # : S. Main  
 City, State, ZIP Code : Athol, KS 66932

**3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:**

	N	
X	NW	NE
W		E
	SW	SE
	S	

**4 DEPTH OF COMPLETED WELL 30 ft.**  
**MW10**  
 Depth(s) Groundwater Encountered 1 \_\_\_\_\_ ft. 2 \_\_\_\_\_ ft. 3 \_\_\_\_\_ ft.  
 WELL'S STATIC WATER LEVEL 21.17 ft. below land surface measured on mo/day/yr 3/26/08  
 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 X; If yes, mo/day/yrs  
 Sample was submitted \_\_\_\_\_ Water Well Disinfected? Yes \_\_\_\_\_ No X

**5 TYPE OF CASING USED:** 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought Iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) CASING JOINTS: Glued \_\_\_\_\_ Clamped \_\_\_\_\_ Welded \_\_\_\_\_ Threaded X  
 Blank casing diameter 2 in. to 10 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height below land surface 0.30 ft., Weight \_\_\_\_\_ lbs./ft. Wall thickness or gauge No. \_\_\_\_\_  
**TYPE OF SCREEN OR PERFORATION MATERIAL:** 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RM (SR) 9 ABS 10 Asbestos-Cement 11 Other (specify) 12 None used (open hole)  
**SCREEN OR PERFORATION OPENINGS ARE:** 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauze wrapped 6 Wire wrapped 7 Torch cut 8 Saw Cut 9 Drilled holes 10 Other (specify) 11 None (open hole)  
**SCREEN-PERFORATED INTERVALS:** From 10 ft. to 30 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
**GRAVEL PACK INTERVALS:** From 9 ft. to 30 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**6 GROUT MATERIAL:** 1 Neat cement 2 Cement grout 3 Bentonite 4 Other concrete, 0-2'  
 Grout Intervals From 2 ft. to 9 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide Storage 14 Abandoned water well 15 Oil well/ gas well 16 Other (specify below)  
 Direction from well? W How many feet? ~90

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Grass, topsoil - silt, brown			
3	5	Silt, little clay, brown, slightly moist, no odor			
8	10	Silt, little clay, some fine sand, brown, moist, no odor			
13	15	Silt, trace clay, w/ fine sand, brown, moist, no odor			
18	30	Silt, trace clay, w/ fine sand, brown, wet, no odor			
					Flushmount waiver from BOW

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was 1 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 3/26/08 and this record is true to the best of my knowledge and belief.  
 Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 4/10/08  
 under the business name of Larsen & Associates, Inc. by (signature) \_\_\_\_\_

**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 http://www.kdheks.gov/waterwell.