WATER WELL RECORD Form WWC-5

Division of Water Resources App. No. _____

1 LOCATION OF WATER WELL: Fraction: ¼ SW ¼ SE ¼ SE ¼ | Section Number: 31 | Township Number: T 5 S | Range Number: R 27 ☐E ☒W

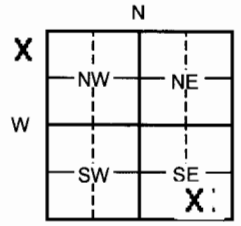
County: **Decatur**

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐.

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 Survey
Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

2 WATER WELL OWNER Jerry Meitl
RR#, St. Address, Box # : 3707 N 154th St
City, State, ZIP Code : Basehor, KS 66007

3 LOCATE WELL WITH AN "X" IN SECTION BOX:



|------1 mile -------|

4 DEPTH OF COMPLETED WELL 185 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 well _____
Was a chemical/bacteriological sample submitted to Department? ☐ Yes x No
If yes, mo/day/yr sample was submitted _____
Water Well Disinfected? x Yes ☐ No

5 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other _____
CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded
Casing diameter 4.5 in. to 145 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
Casing height above land surface 18 in., Weight 2.38 lbs./ft. Wall thickness or gauge No. .248
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 145 ft. to 185 ft., From _____ ft. to _____ ft.
From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From 20 ft. to 185 ft., From _____ ft. to _____ ft.
From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other _____
Grout Intervals From 0 ft. to 20 ft. From _____ ft. to _____ 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 None
Direction from well _____ Distance from well _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Surface	134	160	Caliche & clay w/sand strks
2	33	Loess	160	183	Fine to some med sand w/clay & caliche strks
33	36	Caliche w/clay	183	195	Yellow ochre
36	44	Fine & med sand w/caliche lenses			
44	55	Fine to some med sand w/clay & caliche strks			
55	63	Clay w/caliche strks & sand lenses			
63	72	Fine sand w/clay & caliche strks			
72	100	Clay & caliche w/fine sand strks			
100	114	Sandstone w/clay & caliche strks			
114	134	Sandstone & fine sand w/clay & caliche			

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) 5-19-09 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) 6/05/09 under the business name of Woofter 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.