

WATER WELL RECORD

Form WWC-5

Division of Water Resources: App. No.

1 LOCATION OF WATER WELL: Fraction NW ¼ SW ¼ NW ¼		Section Number 27	Township Number T 6 S	Range Number R 11 W
County: Osborne		Distance and direction from nearest town or city street address of well if located within city? 919 Morgan St., Downs, KS		
2 WATER WELL OWNER: Bob's Inc. RR#, St. Address, Box # : 268 W Hwy 24 City, State, ZIP Code : Downs, KS 67437		Global Positioning System (decimal degrees, min. of 4 digits) Latitude: N 39.50452 ° Longitude: W 98.54381 ° Elevation: RIM: 1484.33; TOC: 1483.66 Datum: above mean sea level Data Collection Method: legal survey		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 35 ft.		
		MW2 Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft. WELL'S STATIC WATER LEVEL 26.46 ft. below land surface measured on mo/day/yr 5/20/09 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/yr _____ Sample was submitted _____ Water Well Disinfected? Yes _____ No X		
5 TYPE OF CASING USED:				
1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded X				
Blank casing diameter 2 in. to 20 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height below land surface 0.67 ft., Weight _____ lbs./ft. Wall thickness or gauge No. _____				
TYPE OF SCREEN OR PERFORATION MATERIAL:				
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify) _____ 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)				
SCREEN OR PERFORATION OPENINGS ARE:				
1 Continuous slot 3 Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) _____				
SCREEN-PERFORATED INTERVALS:				
From 20 ft. to 35 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 18 ft. to 35 ft. From _____ ft. to _____ ft. From _____ ft. to _____ 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 18 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 13 Insecticide Storage 16 Other (specify below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well				
Direction from well? Northwest How many feet? ~40ft				
FROM	TO	LITHOLOGIC LOG	FROM	TO
0	1	Grass, Topsoil; Brown silty clay with limestone gravel, moist	30	35
1	5	Brown silty clay, moderate plasticity, moist		
5	10	Light brown very fine sand, little clay, moist		
10	25	Brown silty clay, little very fine sand, low to moderate plasticity, moist		
25	30	Brown fine to medium grained sand, some clay, wet		
				PLUGGING INTERVALS
				Brown fine to medium to coarse grained sand, some clay, wet
				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) 5/18/09 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) 7/28/09 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 785-296-3522. 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 .				