

## WATER WELL RECORD

## Form WWC-5

Division of Water Resources App. No.  

<b>1 LOCATION OF WATER WELL:</b> County: Cloud	Fraction $\frac{1}{4}$ NW $\frac{1}{4}$ <del>NW</del> $\frac{1}{4}$ <del>NW</del> $\frac{1}{4}$	Section Number 1	Township No. T 6 S	Range Number R 2 <input type="checkbox"/> E <input checked="" type="checkbox"/> W			
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input checked="" type="checkbox"/> .		<b>Global Positioning System (GPS) information:</b> Latitude: 39.566333 (in decimal degrees) Longitude: 97.497944 (in decimal degrees) Elevation: 1382 Datum: <input type="checkbox"/> WGS 84, <input checked="" type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: GARMIN) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m					
<b>2 WATER WELL OWNER:</b> JEFF MORGAN RR#, Street Address, Box #: 1796 N 230 ROAD City, State, ZIP Code : CONCORDIA, KS 66901							
<b>3 LOCATE WELL WITH AN "X" IN SECTION BOX:</b> <div style="text-align: center;">N</div> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">NW</td> <td style="width: 20px; text-align: center;">NE</td> </tr> <tr> <td style="width: 20px; text-align: center;">SW</td> <td style="width: 20px; text-align: center;">SE</td> </tr> </table> <div style="text-align: center;">S</div> <div style="text-align: center;"> -----1 mile----- </div>	NW	NE	SW	SE	<b>4 DEPTH OF COMPLETED WELL</b> 140 ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL 27 ft. below land surface measured on mo/day/yr. 09/03/10..... Pump test data: Well water was..... ft. after..... hours pumping..... gpm EST. YIELD 10 gpm. Well water was..... ft. after..... hours pumping..... gpm Bore Hole Diameter 10 in. to 140 ft., and ..... in. to ..... ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted..... Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
NW	NE						
SW	SE						
<b>5 TYPE OF CASING USED:</b> <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other ..... CASING JOINTS: <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded Casing diameter .5 in. to 140 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft. Casing height above land surface 18 in., Weight 2.893 lbs./ft., Wall thickness or gauge No. 265 TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) ..... <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous slot <input checked="" type="checkbox"/> Mill slot <input type="checkbox"/> Gauze wrapped <input type="checkbox"/> Torch cut <input type="checkbox"/> Drilled holes <input type="checkbox"/> None (open hole) <input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input type="checkbox"/> Wire wrapped <input type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify) ..... SCREEN-PERFORATED INTERVALS: From 80 ft. to 140 ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft. GRAVEL PACK INTERVALS: From 25 ft. to 140 ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft.							
<b>6 GROUT MATERIAL:</b> <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other ..... Grout Intervals: From 5 ft. to 25 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft. What is the nearest source of possible contamination: <input type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Livestock pens <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Other (specify below) <input checked="" type="checkbox"/> Sewer lines <input type="checkbox"/> Cesspool <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Fuel storage <input type="checkbox"/> Abandoned water well <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Seepage pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Oil well/gas well Direction from well 300 ft. Distance from well .....							
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS		
0	2	TOP SOIL	136	143	YELLOW SAND STONE & YELLOW CLAY		
2	17	TAN SANDY CLAY					
17	21	DARK BROWN CLAY					
21	26	LIGHT BROWN SANDY CLAY					
26	66	DARK BROWN CLAY - LIMESTONE					
66	88	LIGHT BROWN CLAY					
88	103	SAND STONE					
103	113	WHITE SAND STONE					
113	118	YELLOW SAND STONE					
118	136	WHITE SAND STONE					
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <input type="checkbox"/> constructed, <input checked="" type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) 09/03/2010.... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 480..... This Water Well Record was completed on (mo/day/year) 11/17/2010..... under the business name of WILLIAMS DRILLING CO. INC. by (signature) <i>Paul Williams</i>							
<b>INSTRUCTIONS:</b> Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. 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 copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each <u>constructed</u> well. Visit us at <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> .							