

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: CLOUD	Fraction NW 1/4 SE 1/4 SE 1/4 NE 1/4	Section Number 31	Township Number T 6 S	Range Number R 2 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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2 WELL OWNER: Last Name: KOESTER First: GARET Business Address: 1627 N 210TH ROAD City: CONDORDIA State: KS ZIP: 66901	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: <input type="checkbox"/> 1255 190TH ROAD CONCORDIA, KS 66901
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3 LOCATE WELL WITH "X" IN SECTION BOX:

N

NW	NE
SW	SE

S

----- 1 mile -----

4 DEPTH OF COMPLETED WELL: **180** ft.
 Depth(s) Groundwater Encountered: 1) **80** ft.
 2) ft. 3) ft. or 4) Dry Well
WELL'S STATIC WATER LEVEL: **80** ft.
 below land surface, measured on (mo-day-yr) **06/27/2019**
 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: **15** gpm
 Bore Hole Diameter: **10** in. to **180** ft. and
 in. to ft.

5 Latitude: **39.489334** (decimal degrees)
Longitude: **-97.574798** (decimal degrees)
 Horizontal Datum: WGS 84 NAD 83 NAD 27
 Source for Latitude/Longitude:
 GPS (unit make/model: **GARMIN**)
 (WAAS enabled? Yes No)
 Land Survey Topographic Map
 Online Mapper:

6 Elevation: **1449** ft. Ground Level TOC
 Source: Land Survey GPS Topographic Map
 Other

7 WELL WATER TO BE USED AS:

1. Domestic: <input checked="" type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock	5. <input type="checkbox"/> Public Water Supply: well ID 6. <input type="checkbox"/> Dewatering: how many wells? 7. <input type="checkbox"/> Aquifer Recharge: well ID 8. <input type="checkbox"/> Monitoring: well ID	10. <input type="checkbox"/> Oil Field Water Supply: lease 11. Test Hole: well ID <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water
2. <input type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial	9. Environmental Remediation: well ID <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection	13. <input type="checkbox"/> 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 **5** in. to **100** ft. Diameter in. to ft. Diameter in. to ft.
 Casing height above land surface **0** in. Weight **2.893** lbs./ft. Wall thickness or gauge No. **.265**

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 **100** ft. to **180** ft. From ft. to ft. From ft. to ft.
GRAVEL PACK INTERVALS: From **30** ft. to **180** ft. From ft. to ft. From ft. to ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other
 Grout Intervals: From **3** ft. to **30** 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
0	3	TOP SOIL	142	164	SAND STONE
3	20	TAN CLAY	164	167	FIRE CLAY
20	23	SAND ROCK	167	180	SAND STONE
23	33	GRAY CLAY			
33	36	WHITE-GRAY CLAY			
36	43	LIGHT GRAY CLAY			
43	102	FIRE CLAY			
102	123	ND STONE			
123	142	FIRE CLAY			

Notes:
CASED AT 180 FT

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) **06/27/19** 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) **07/11/19** under the business name of **WILLIAMS DRILLING CO. INC.** Signature *For Williams*

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.