

Corrected

## WATER WELL RECORD Form WWC-5

☒ Original Record ☐ Correction ☐ Change in Well UseDivision of Water  
Resources App. No.

Well ID

MW-103

<b>1 LOCATION OF WATER WELL:</b> County: <b>Sherman</b>		Fraction SW ¼ SW ¼ NW ¼ SE ¼		Section Number <b>21</b>		Township Number T <b>8</b> S		Range Number R <b>39</b> <input type="checkbox"/> E <input checked="" type="checkbox"/> W																																																													
<b>2 WELL OWNER:</b> Last Name: First: 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"/> Business: <b>ADM Grain</b> Address: <b>PO Box 1470</b> Address: <b>4666 Faries Parkway</b> City: <b>Decatur</b> State: <b>IL</b> ZIP: <b>62526</b> <b>6425 Rd 21</b>																																																																					
<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> N  W E S [-----1 mile-----]		<b>4 DEPTH OF COMPLETED WELL:</b> <b>225</b> ft. Depth(s) Groundwater Encountered: 1) <b>195</b> ft. 2) ..... ft. 3) ..... ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: <b>195</b> ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) <b>02/11/2015</b> <input type="checkbox"/> 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: <b>1.5</b> gpm Bore Hole Diameter: <b>8</b> in. to <b>225</b> ft. and ..... in. to ..... ft.			<b>5 Latitude:</b> <b>39.3411</b> (decimal degrees) <b>Longitude:</b> <b>101.6876</b> (decimal degrees) Datum: <input checked="" type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 Source for Latitude/Longitude: <input type="checkbox"/> GPS (unit make/model: ..... (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: .....																																																																
<b>6 Elevation:</b> <b>3661</b> ft. <input checked="" type="checkbox"/> Ground Level <input type="checkbox"/> TOC Source: <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input checked="" type="checkbox"/> Other <b>KOLAR</b>																																																																					
<b>7 WELL WATER TO BE USED AS:</b> 1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock 2. <input type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial 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 checked="" type="checkbox"/> Monitoring: well ID <b>MW-103</b> 9. Environmental Remediation: well ID ..... <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection 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 13. <input type="checkbox"/> Other (specify): .....																																																																					
<b>Was a chemical/bacteriological sample submitted to KDHE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, date sample was submitted: ..... Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																																																					
<b>8 TYPE OF CASING USED:</b> <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other ..... CASING JOINTS: Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Threaded Casing diameter <b>4</b> in. to <b>165</b> ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft. Casing height above land surface <b>0</b> in. Weight <b>2.071</b> lbs./ft. Wall thickness or gauge No. <b>237</b> <b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) ..... <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> None used (open hole) <b>SCREEN OR PERFORATION OPENINGS ARE:</b> <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"/> Other (Specify) ..... <input type="checkbox"/> Louvered Shutter <input type="checkbox"/> Key Punched <input type="checkbox"/> Wire Wrapped <input type="checkbox"/> Saw Cut <input type="checkbox"/> None (Open Hole) <b>SCREEN-PERFORATED INTERVALS:</b> From <b>165</b> ft. to <b>225</b> ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft. <b>GRAVEL PACK INTERVALS:</b> From <b>163</b> ft. to <b>225</b> ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.																																																																					
<b>9 GROUT MATERIAL:</b> <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other ..... Grout Intervals: From <b>0</b> ft. to <b>5</b> ft., From <b>5</b> ft. to <b>163</b> ft., From ..... ft. to ..... ft. <b>Nearest source of possible contamination:</b> <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"/> Sewer Lines <input type="checkbox"/> Cess Pool <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 <input type="checkbox"/> Other (Specify) ..... Direction from well? ..... Distance from well? ..... ft.																																																																					
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">10 FROM</th> <th style="width:10%;">TO</th> <th style="width:40%;">LITHOLOGIC LOG</th> <th style="width:10%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:20%;">LITHO. LOG (cont.) or PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>2</td> <td>surface</td> <td>147</td> <td>167</td> <td>clay &amp; caliche w/sand strks</td> </tr> <tr> <td>2</td> <td>18</td> <td>loess</td> <td>167</td> <td>225</td> <td>fine to some med sand w/clay &amp; caliche strk</td> </tr> <tr> <td>18</td> <td>35</td> <td>clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>35</td> <td>43</td> <td>clay w/traces of caliche &amp; sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>43</td> <td>54</td> <td>fine &amp; med sand &amp; gravel w/clay &amp; caliche</td> <td></td> <td></td> <td></td> </tr> <tr> <td>54</td> <td>72</td> <td>clay &amp; caliche w/sand lenses</td> <td></td> <td></td> <td></td> </tr> <tr> <td>72</td> <td>103</td> <td>fine &amp; med and w/clay &amp; caliche strks</td> <td></td> <td></td> <td></td> </tr> <tr> <td>103</td> <td>133</td> <td>clay &amp; caliche w/sand strks</td> <td></td> <td></td> <td></td> </tr> <tr> <td>133</td> <td>147</td> <td>fine &amp; med sand w/clay &amp; caliche strks</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <div style="margin-top: 10px;"> <b>Notes:</b> </div>										10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS	0	2	surface	147	167	clay & caliche w/sand strks	2	18	loess	167	225	fine to some med sand w/clay & caliche strk	18	35	clay				35	43	clay w/traces of caliche & sand				43	54	fine & med sand & gravel w/clay & caliche				54	72	clay & caliche w/sand lenses				72	103	fine & med and w/clay & caliche strks				103	133	clay & caliche w/sand strks				133	147	fine & med sand w/clay & caliche strks			
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<b>11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo-day-year) <b>02/11/2015</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>881</b> This Water Well Record was completed on (mo-day-year) <b>02/25/2015</b> under the business name of <b>Woofert Pump and Well, Inc.</b>																																																																					

Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.

KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.

Visit us at <http://www.kdheks.gov/waterwell/index.html>

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