

# WATER WELL RECORD Form WWC-5

☒ Original Record ☐ Correction ☐ Change in Well Use

Division of Water  
Resources App. No.

Well ID MW-3

<b>1 LOCATION OF WATER WELL:</b> County: Sherman		Fraction NW ¼ NE ¼ SE ¼ SE ¼		Section Number 25		Township Number T 8 S		Range Number R 40 <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: Triplett, Inc Address: PO Box 647 Address: City: Salina State: KS ZIP: 67402 2710 Commerce Road, Goodland																																																																					
<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> N <div style="border: 1px solid black; width: 100px; height: 100px; margin: 10px auto; position: relative;"><div style="position: absolute; top: 0; left: 0; width: 100%; height: 100%; border: 1px solid black; border-style: dashed;"></div><div style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); font-size: 2em;">X</div></div> S -----1 mile-----		<b>4 DEPTH OF COMPLETED WELL:</b> 230.5 ft. Depth(s) Groundwater Encountered: 1) ..... ft. 2) ..... ft. 3) ..... ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: 212.96 ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) 3/8/2023 <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: ..... gpm Bore Hole Diameter: 8.5 in. to 230.5 ft. and ..... in. to ..... ft.		<b>5 Latitude:</b> 39.325720 (decimal degrees) <b>Longitude:</b> 101.727678 (decimal degrees) <b>Horizontal Datum:</b> <input type="checkbox"/> WGS 84 <input checked="" type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 <b>Source for Latitude/Longitude:</b> <input checked="" type="checkbox"/> GPS (unit make/model: SPECTRA/SP85) (WAAS enabled? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: ..... <b>6 Elevation:</b> 3708.54 ft. <input type="checkbox"/> Ground Level <input checked="" type="checkbox"/> TOC <b>Source:</b> <input checked="" type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other .....																																																																	
<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 MW-3 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 type="checkbox"/> PVC <input type="checkbox"/> Other ..... CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Threaded Casing diameter 4 in. to 230.5 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft. Casing height above land surface -4 in. Weight ..... lbs./ft. Wall thickness or gauge No. .... <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 200 ft. to 230.5 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft. <b>GRAVEL PACK INTERVALS:</b> From 198 ft. to 230.5 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.																																																																					
<b>9 GROUT MATERIAL:</b> <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input type="checkbox"/> Bentonite <input type="checkbox"/> Other ..... Grout Intervals: From 1 ft. to 198 ft., From ..... ft. to ..... 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 checked="" 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>10 FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>LITHO. LOG (cont.) or PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>0.5</td> <td>Asphalt</td> <td>167</td> <td>183</td> <td>Gravelly sand with clay</td> </tr> <tr> <td>0.5</td> <td>10</td> <td>Clay with silt</td> <td>183</td> <td>197</td> <td>Sandy clay</td> </tr> <tr> <td>10</td> <td>27</td> <td>Silt</td> <td>197</td> <td>233</td> <td>Clay and caliche</td> </tr> <tr> <td>27</td> <td>40</td> <td>Clay and caliche</td> <td></td> <td></td> <td></td> </tr> <tr> <td>40</td> <td>54</td> <td>Caliche and clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>54</td> <td>73</td> <td>Gravelly sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>73</td> <td>76</td> <td>Caliche with clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>76</td> <td>118</td> <td>Gravelly sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>118</td> <td>167</td> <td>Clay with sand</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>										10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS	0	0.5	Asphalt	167	183	Gravelly sand with clay	0.5	10	Clay with silt	183	197	Sandy clay	10	27	Silt	197	233	Clay and caliche	27	40	Clay and caliche				40	54	Caliche and clay				54	73	Gravelly sand				73	76	Caliche with clay				76	118	Gravelly sand				118	167	Clay with sand			
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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) 2/20/2023 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 881 This Water Well Record was completed on (mo-day-year) 3/28/2023 under the business name of Woofert Pump & Well Signature _____ 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. Visit us at <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> KSA 82a-1212 <b>Revised 7/10/2015</b>																																																																					

Twp. 8 Rge. 40W Sec. 25

County: Sherman

KDHE: Goodland 24-7 Travel Store, U6-091-15432

PLOTTED: 3/20/2023 10:48 AM SAVED: 3/20/2023 10:44 AM Brian S. Fahrenbrugh G:\Projects\251\251-P24-03\LSA 3-2023\Figure 2.2.dwg

