

WATER WELL RECORD Form WWC-5

☐ Original Record ☐ Correction ☐ Change in Well Use

Division of Water
Resources App. No.

Well ID

1 LOCATION OF WATER WELL: County: _____		Fraction <div style="text-align: center; padding-top: 5px;">1/4 1/4 1/4 1/4</div>		Section Number _____		Township Number T S		Range Number R E W																																																										
2 WELL OWNER: Last Name: _____ First: _____ Business: _____ Address: _____ City: _____ State: _____ ZIP: _____				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"/>																																																														
3 LOCATE WELL WITH "X" IN SECTION BOX: N <div style="text-align: center; margin-top: 10px;"><table border="1" style="width: 100px; height: 100px; border-collapse: collapse; margin: auto;"><tr><td style="padding: 5px;">NW</td><td style="padding: 5px;">NE</td></tr><tr><td style="padding: 5px;">SW</td><td style="padding: 5px; text-align: center;">X</td></tr></table></div> S <div style="text-align: center; font-size: small;">-----1 mile-----</div>		NW	NE	SW	X	4 DEPTH OF COMPLETED WELL: ft. Depth(s) Groundwater Encountered: 1) ft. 2) ft. 3) ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: ft. <input type="checkbox"/> below land surface, measured on (mo-day-yr)..... <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: in. to ft. and in. to ft.				5 Latitude:(decimal degrees) Longitude:(decimal degrees) Datum: <input type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 <u>Source for Latitude/Longitude:</u> <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: 6 Elevation:ft. <input type="checkbox"/> Ground Level <input type="checkbox"/> TOC <u>Source:</u> <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other																																																								
NW	NE																																																																	
SW	X																																																																	
7 WELL WATER TO BE USED AS: <table style="width: 100%;"><tr><td style="width: 33%;">1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock</td><td style="width: 33%;">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 9. Environmental Remediation: well ID <div style="display: flex; justify-content: space-between;"><div>Air Sparge Soil Vapor Extraction</div><div>Recovery Injection</div></div></td><td style="width: 33%;">10. <input type="checkbox"/> Oil Field Water Supply: lease 11. Test Hole: well ID <div style="display: flex; justify-content: space-between;"><div>Cased Uncased Geotechnical</div><div>Geothermal: how many bores? a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water</div></div> 13. <input type="checkbox"/> Other (specify):</td></tr></table>										1. Domestic: <input 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 9. Environmental Remediation: well ID <div style="display: flex; justify-content: space-between;"><div>Air Sparge Soil Vapor Extraction</div><div>Recovery Injection</div></div>	10. <input type="checkbox"/> Oil Field Water Supply: lease 11. Test Hole: well ID <div style="display: flex; justify-content: space-between;"><div>Cased Uncased Geotechnical</div><div>Geothermal: how many bores? a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water</div></div> 13. <input type="checkbox"/> Other (specify):																																																						
1. Domestic: <input 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 9. Environmental Remediation: well ID <div style="display: flex; justify-content: space-between;"><div>Air Sparge Soil Vapor Extraction</div><div>Recovery Injection</div></div>	10. <input type="checkbox"/> Oil Field Water Supply: lease 11. Test Hole: well ID <div style="display: flex; justify-content: space-between;"><div>Cased Uncased Geotechnical</div><div>Geothermal: how many bores? a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water</div></div> 13. <input type="checkbox"/> Other (specify):																																																																
Was a chemical/bacteriological sample submitted to KDHE? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, date sample was submitted: Water well disinfected? <input type="checkbox"/> Yes <input type="checkbox"/> No																																																																		
8 TYPE OF CASING USED: <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 type="checkbox"/> Threaded Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel</div><div><input type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="checkbox"/> None used (open hole)</div></div> SCREEN OR PERFORATION OPENINGS ARE: <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Continuous Slot <input type="checkbox"/> Mill Slot <input type="checkbox"/> Gauze Wrapped <input type="checkbox"/> Torch Cut <input type="checkbox"/> Drilled Holes <input type="checkbox"/> Other (Specify)</div><div><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)</div></div> SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.																																																																		
9 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input type="checkbox"/> Bentonite <input type="checkbox"/> Other Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft. Nearest source of possible contamination: No potential source of contamination within 200 ft. <table style="width: 100%;"><tr><td style="width: 33%;">Septic Tank Lateral Lines Pit Privy</td><td style="width: 33%;">Livestock Pens Insecticide Storage</td></tr><tr><td>Sewer Lines Cess Pool Sewage Lagoon</td><td>Fuel Storage Abandoned Water Well</td></tr><tr><td>Watertight Sewer Lines Seepage Pit Feedyard</td><td>Fertilizer Storage Oil Well/Gas Well</td></tr><tr><td colspan="2">Other (Specify)</td></tr></table> Direction from well? Distance from well? ft.										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)																																																		
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)																																																																		
<table style="width: 100%;"><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> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td colspan="3" rowspan="4" style="vertical-align: top; padding-left: 10px;">Notes:</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table>										10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS																																								Notes:											
10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS																																																													
			Notes:																																																															
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo-day-year) under the business name of																																																																		
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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 KSA 82a-1212																																																																		