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 ¼ ¼ ¼ ¼	Section Number	Township Number T S	Range Number R ☐ E ☐ W

2 WELL OWNER: Last Name: _____ First: _____

Business: _____
Address: _____
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: ☐

3 LOCATE WELL WITH "X" IN SECTION BOX:

N

- - NW - - | - - NE - - X
W _____ E
- - SW - - | - - SE - -

S

|----------1 mile--------|

4 DEPTH OF COMPLETED WELL: ………..… ft.

Depth(s) Groundwater Encountered: 1) ……..….… ft.
  2) ………... ft.   3) ………... ft., or 4) ☐ Dry Well
WELL'S STATIC WATER LEVEL: ………..……. ft.
  ☐ below land surface, measured on (mo-day-yr)…….…..….
  ☐ 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: ☐ WGS 84   ☐ NAD 83   ☐ NAD 27
Source for Latitude/Longitude:
  ☐ GPS (unit make/model: ……………….…..……....…..…)
    (WAAS enabled? ☐ Yes   ☐ No)
  ☐ Land Survey   ☐ Topographic Map
  ☐ Online Mapper: ……………………………………….....

6 Elevation: ….....……………ft. ☐ Ground Level ☐ TOC
  Source: ☐ Land Survey   ☐ GPS   ☐ Topographic Map
    ☐ Other …..…………………………………….…..

7 WELL WATER TO BE USED AS:

1. Domestic:
  ☐ Household
  ☐ Lawn & Garden
  ☐ Livestock
2. ☐ Irrigation
3. ☐ Feedlot
4. ☐ Industrial

5. ☐ Public Water Supply: well ID ....
6. ☐ Dewatering: how many wells? ....
7. ☐ Aquifer Recharge: well ID ……………........
8. ☐ Monitoring: well ID …………….…………….
9. Environmental Remediation: well ID ……….......
  ☐ Air Sparge   ☐ Soil Vapor Extraction
  ☐ Recovery   ☐ Injection

10. ☐ Oil Field Water Supply: lease ………..…….….……
11. Test Hole: well ID ……………..……………
  ☐ Cased   ☐ Uncased   ☐ Geotechnical
12. Geothermal: how many bores? ....
  a) Closed Loop ☐ Horizontal ☐ Vertical
  b) Open Loop ☐ Surface Discharge ☐ Inj. of Water
13. ☐ 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 ……………... 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:
  ☐ Steel   ☐ Stainless Steel   ☐ PVC   ☐ Other (Specify) ………..……………..…………..
  ☐ Brass   ☐ Galvanized Steel   ☐ 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 ……..… 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: ☐ Neat cement   ☐ Cement grout   ☐ Bentonite   ☐ 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.
  ☐ 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
			Notes:		

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) ………………... 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 ………...