

## WATER WELL RECORD

## Form WWC-5

Division of Water Resources App. No.  

<b>1 LOCATION OF WATER WELL:</b> County: Allen Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> . MW-13 910 Mulberry St., Humboldt, KS	Fraction $\frac{1}{4}$ NE $\frac{1}{4}$ SE $\frac{1}{4}$ SE $\frac{1}{4}$	Section Number 4	Township No. T 26 S	Range Number R 18 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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**Global Positioning System (GPS) information:**  
 Latitude: 37.808889 (in decimal degrees)  
 Longitude: 95.434917 (in decimal degrees)  
 Elevation: .....  
 Datum: ☐ WGS 84, ☒ NAD 83, ☐ NAD 27  
 Collection Method:  
☒ GPS unit (Make/Model: Garmin 60CS)  
☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey  
 Est. Accuracy: ☒ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

<b>2 WATER WELL OWNER:</b> Aday's Speedy Mac RR#, Street Address, Box #: 317 S. 9th St. City, State, ZIP Code : Humboldt, KS	<b>3 LOCATE WELL WITH AN "X" IN SECTION BOX:</b> <div style="text-align: center;"> </div>
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**4 DEPTH OF COMPLETED WELL** 10 ft.  
 Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.  
 WELL'S STATIC WATER LEVEL..... ft. below land surface measured on mo/day/yr.....  
 Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm  
 EST. YIELD ..... gpm. Well water was ..... ft. after ..... hours pumping ..... gpm  
 Bore Hole Diameter 8..... in. to 10..... ft., and ..... in. to ..... ft.  
 WELL WATER TO BE USED AS: ☐ Public water supply ☐ Geothermal ☐ Injection well  
☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below)  
☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☒ Monitoring well  
 Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☒ No  
 If yes, mo/day/yr sample was submitted. NA  
 Water well disinfected? ☐ Yes ☒ No

**5 TYPE OF CASING USED:** ☐ Steel ☒ PVC ☐ Other .....  
 CASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ☒ Threaded  
 Casing diameter 2..... in. to 5..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
 Casing height above land surface. Flush..... in., Weight ..... lbs./ft., Wall thickness or gauge No. Sch. 40  
 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 ☐ None (open hole)  
☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☐ Saw cut ☐ Other (specify) .....  
 SCREEN-PERFORATED INTERVALS: From 10..... ft. to 5..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From 10..... ft. to 3..... ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**6 GROUT MATERIAL:** ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other .....  
 Grout Intervals: From 3..... ft. to 1..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 What is the nearest source of possible contamination:  
☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below)  
☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☒ Fuel storage ☐ Abandoned water well  
☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☒ Fertilizer storage ☐ Oil well/gas well  
 Direction from well ..... Distance from well .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	1	Topsoil			
1	1.5	Gravel			
1.5	2.5	Clay			
2.5	6	Clay w/sandy gravel			
6	10	Weathered Shale			
10		Boring Terminated			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo/day/year) 9/30/09..... and this record is true to the best of my knowledge and belief.  
 Kansas Water Well Contractor's License No. 710..... This Water Well Record was completed on (mo/day/year) 10/6/09.....  
 under the business name of Below Ground Surface, Inc. by (signature) whitney

**INSTRUCTIONS:** Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522 Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.