

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: Business: Address: Address: City:			First: 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 <table border="1" style="width: 100%; height: 100%; text-align: center;"> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td>X</td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </table> S -----1 mile-----									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 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:				
	X																							
7 WELL WATER TO BE USED AS:																								
1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock			5. <input type="checkbox"/> Public Water Supply: well ID			10. <input type="checkbox"/> Oil Field Water Supply: lease																		
2. <input type="checkbox"/> Irrigation			6. <input type="checkbox"/> Dewatering: how many wells?			11. Test Hole: well ID																		
3. <input type="checkbox"/> Feedlot			7. <input type="checkbox"/> Aquifer Recharge: well ID			<input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical																		
4. <input type="checkbox"/> Industrial			8. <input type="checkbox"/> Monitoring: well ID			12. Geothermal: how many bores?																		
			9. Environmental Remediation: well ID			a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical																		
			<input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction			b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water																		
			<input type="checkbox"/> Recovery <input type="checkbox"/> Injection			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: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other (Specify)																								
<input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole)																								
SCREEN OR PERFORATION OPENINGS ARE: <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)																								
<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)																								
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.																								
<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.																								
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 constructed well.