WATER WELL RECORD   Form WWC-5   `1309294`

Division of Water Resources App. No. [   ]   Well ID [   ]

☐ Original Record ☐ Correction ☐ Change in Well Use

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:
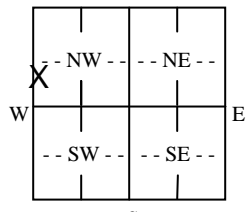Address:
City: State: ZIP:

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: ☐

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3 LOCATE WELL WITH "X" IN SECTION BOX:

N

- - NW - -	- - NE - -

W ————————— E

- - SW - -	- - SE - -

X (in NW)

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 …..……………………………….……..

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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

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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   ☐ Fiberglass   ☐ PVC   ☐ Other (Specify) ………..………….…………..
  ☐ Brass   ☐ Galvanized Steel   ☐ Concrete tile   ☐ 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.

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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:
  ☐ 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.

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10 FROM	TO	**LITHOLOGIC LOG**	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
			Notes:		

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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 ……...