

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:		Fraction		Section Number		Township Number		Range Number																																	
County:		<table style="width: 100%; text-align: center;"> <tr> <td>$\frac{1}{4}$</td> <td>$\frac{1}{4}$</td> <td>$\frac{1}{4}$</td> <td>$\frac{1}{4}$</td> </tr> </table>		$\frac{1}{4}$	$\frac{1}{4}$	$\frac{1}{4}$	$\frac{1}{4}$			<table style="width: 100%; text-align: center;"> <tr> <td>T</td> <td>S</td> </tr> </table>		T	S	<table style="width: 100%; text-align: center;"> <tr> <td>R</td> <td><input type="checkbox"/> E <input type="checkbox"/> W</td> </tr> </table>		R	<input type="checkbox"/> E <input type="checkbox"/> W																								
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T	S																																								
R	<input type="checkbox"/> E <input type="checkbox"/> W																																								
2 WELL OWNER: Last Name:			First:		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"/>																																				
Business:																																									
Address:																																									
Address:																																									
City:			State:		ZIP:																																				
3 LOCATE WELL WITH "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: _____ ft.			5 Latitude: _____(decimal degrees)																																				
N		Depth(s) Groundwater Encountered: 1) _____ ft.			Longitude: _____(decimal degrees)																																				
<table border="1" style="width: 100%; height: 100px; text-align: center;"> <tr><td></td><td></td><td></td><td></td></tr> <tr><td>NW</td><td>X</td><td>NE</td><td></td></tr> <tr><td>SW</td><td></td><td>SE</td><td></td></tr> <tr><td>W</td><td></td><td></td><td>E</td></tr> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td>S</td><td></td><td></td></tr> <tr><td colspan="4">-----1 mile-----</td></tr> </table>						NW	X	NE		SW		SE		W			E										S			-----1 mile-----				2) _____ ft. 3) _____ ft., or 4) <input type="checkbox"/> Dry Well			Datum: <input type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27				
NW	X	NE																																							
SW		SE																																							
W			E																																						
	S																																								
-----1 mile-----																																									
WELL'S STATIC WATER LEVEL: _____ ft.			<input type="checkbox"/> below land surface, measured on (mo-day-yr).....			<u>Source for Latitude/Longitude:</u>																																			
Pump test data: Well water was _____ ft.			<input type="checkbox"/> above land surface, measured on (mo-day-yr).....			<input type="checkbox"/> GPS (unit make/model:)																																			
after..... hours pumping gpm			Well water was _____ ft.			(WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No)																																			
Well water was _____ ft.			after..... hours pumping gpm			<input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map																																			
Estimated Yield:gpm			Bore Hole Diameter: _____ in. to _____ ft. and			<input type="checkbox"/> Online Mapper:																																			
		 in. to _____ ft.			6 Elevation:ft. <input type="checkbox"/> Ground Level <input type="checkbox"/> TOC																																			
						Source: <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map																																			
						<input type="checkbox"/> Other																																			

7 WELL WATER TO BE USED AS:

<p>1. Domestic:</p> <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock <p>2. <input type="checkbox"/> Irrigation</p> <p>3. <input type="checkbox"/> Feedlot</p> <p>4. <input type="checkbox"/> Industrial</p>	<p>5. <input type="checkbox"/> Public Water Supply: well ID</p> <p>6. <input type="checkbox"/> Dewatering: how many wells?</p> <p>7. <input type="checkbox"/> Aquifer Recharge: well ID</p> <p>8. <input type="checkbox"/> Monitoring: well ID</p> <p>9. Environmental Remediation: well ID</p> <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection	<p>10. <input type="checkbox"/> Oil Field Water Supply: lease</p> <p>11. Test Hole: well ID</p> <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical <p>12. Geothermal: how many bores?</p> a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water <p>13. <input type="checkbox"/> Other (specify):</p>
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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:

<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: 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.

<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 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