

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:

1/4 1/4 1/4 1/4

T S

R E 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:

Business:

Address:

Address:

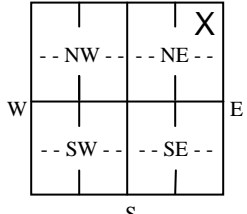
City:

State:

ZIP:

3 LOCATE WELL WITH "X" IN SECTION BOX:

N



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:

- | | | |
|---|---|---|
| <p>1. Domestic:</p> <ul style="list-style-type: none"> <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> <p><input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction</p> <p><input type="checkbox"/> Recovery <input type="checkbox"/> Injection</p> | <p>10. <input type="checkbox"/> Oil Field Water Supply: lease</p> <p>11. Test Hole: well ID</p> <ul style="list-style-type: none"> <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical <p>12. Geothermal: how many bores?</p> <p>a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical</p> <p>b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water</p> <p>13. <input type="checkbox"/> Other (specify):</p> |
|---|---|---|

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 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.

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:

- | | | | | |
|---|--|--|---|---|
| <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

Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.

KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.

Visit us at <http://www.kdheks.gov/waterwell/index.html>

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