

**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources App. No.  

<b>1 LOCATION OF WATER WELL:</b> County: Russell	Fraction SE ¼ SE ¼ NW ¼ ¼	Section Number 33	Township No. T 13 S	Range Number R 12 <input type="checkbox"/> E <input type="checkbox"/> W
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"/> . from 196th St & Homer Rd N 1/2 m on 196th then W 1/2 m thru field to unnamed rd		<b>Global Positioning System (GPS) information:</b> Latitude: ..... (in decimal degrees) Longitude: ..... (in decimal degrees) Elevation: ..... Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model: .....) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m		
<b>2 WATER WELL OWNER:</b> Max Heim RR#, Street Address, Box #: 3745 191st St City, State, ZIP Code : Russell, KS 67665				

<b>3 LOCATE WELL WITH AN "X" IN SECTION BOX:</b> N  S -----1 mile-----	<b>4 DEPTH OF COMPLETED WELL</b> 300 ..... ft. Depth(s) Groundwater Encountered (1) 238 ..... ft. (2) ..... ft. (3) ..... ft. WELL'S STATIC WATER LEVEL 240 ..... ft. below land surface measured on mo/day/yr. 9/4/14 Pump test data: Well water was 240 ..... ft. after 2 ..... hours pumping 10 ..... gpm EST. YIELD 10 ..... gpm. Well water was ..... ft. after ..... hours pumping ..... gpm Bore Hole Diameter 10 ..... in. to 300 ..... ft., and ..... in. to ..... ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well ..... Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted..... Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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**5 TYPE OF CASING USED:**  Steel  PVC  Other .....  
**CASING JOINTS:**  Glued  Clamped  Welded  Threaded  
 Casing diameter 5 ..... in. to 300 ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
 Casing height above land surface 24 ..... in., Weight 3.53 ..... lbs./ft., Wall thickness or gauge No. 17 .....  
**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 300 ..... ft. to 240 ..... ft., From ..... ft. to ..... ft.  
**GRAVEL PACK INTERVALS:** From 300 ..... ft. to 38 ..... ft., From ..... ft. to ..... ft.

**6 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other .....  
 Grout Intervals: From 38 ..... ft. to 0 ..... 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	Top Soil	168	175	Dakota Clay w/ rocks
1	8	Clay	175	185	White clay
8	10	Limestone clay/orange	185	200	Dakota Clay w/ rocks
10	15	Limestone clay/tan	200	210	Dakota Clay
15	20	Limestone & white clay	210	238	Grey clay w/ sandrock
20	30	White clay	238	240	Sandrock
30	140	Shale	240	268	Gray Clay w/sandrock
140	150	Dakota Clay	268	270	Sandrock
150	160	Dakota Clay w/ rocks	270	300	Mix of clay and sandrock
160	168	Dakota clay			

**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) 10/10/14 ..... and this record is true to the best of my knowledge and belief.  
 Kansas Water Well Contractor's License No. 0199 ..... This Water Well Record was completed on (mo/day/year) 10/17/14 .....  
 under the business name of Karst Water Well Drilling & Service, Inc. .... by (signature) .....

**INSTRUCTIONS:** Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. 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>