

**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: Russell

Fraction 1/4 NE 1/4 SW 1/4 NW 1/4

Section Number 28

Township Number T 13 S

Range Number R 15  E  W

**2 WELL OWNER:** Last Name: Weigel First: David

Business:

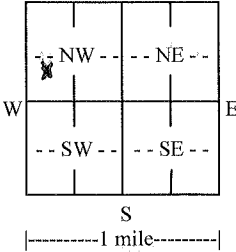
Address: 81 Chicago

Address:

City: Gorham State: KS ZIP: 67640

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:   
Hwy 40 and 177th take 177th 3/4 mile north west into house

**3 LOCATE WELL WITH "X" IN SECTION BOX:**



**4 DEPTH OF COMPLETED WELL:** 175 ft.

Depth(s) Groundwater Encountered: 1) ..... ft.

2) ..... ft. 3) ..... ft., or 4)  Dry Well

WELL'S STATIC WATER LEVEL: 130 ft.

below land surface, measured on (mo-day-yr).....

above land surface, measured on (mo-day-yr) 9-27-13

Pump test data: Well water was ..... ft.

after ..... hours pumping ..... gpm

Well water was ..... ft.

after ..... hours pumping ..... gpm

Estimated Yield: 7 gpm

Bore Hole Diameter: 9 in. to 175 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:**

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

**8 TYPE OF CASING USED:**  Steel  PVC  Other ..... CASING JOINTS:  Glued  Clamped  Welded  Threaded

Casing diameter 5 in. to 175 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.

Casing height above land surface 15 in. Weight ..... lbs./ft. Wall thickness or gauge No. 5042-2-1

**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 175 ft. to 155 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From 175 ft. to 20 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**9 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other .....

Grout Intervals: From 20 ft. to 0 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.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	TOP SOIL			
2	20	tan clay + limestone			
20	100	shale			
100	120	Brown Rock Grey clay widely			
120	160	shale, sandstone Brecks			
160	175	sandstone, white clay, coal, blue clay			

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) 9-27-13 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 776 This Water Well Record was completed on (mo-day-year) Oct. 15, 13 under the business name of Rising Water Well

INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) 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) 296-3565.

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

KSA 82a-1212

Revised 9/10/2012