

# WATER WELL RECORD Form WWC-5

☒ Original Record ☐ Correction ☐ Change in Well Use

Division of Water  
Resources App. No.

(KGSORL)

Well ID

## 1 LOCATION OF WATER WELL:

County: Ellsworth

Fraction

1/4 SW 1/4 NE 1/4 SE 1/4

Section Number

10

Township Number

T15 10 S

Range Number

R 10 ☐ E ☒ W

## 2 WELL OWNER: Last Name: Diabal

First: Darwin

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: ☐  
2 1/2 W of Blackwell, KS

Business:

Address: 916 2nd Road

Address:

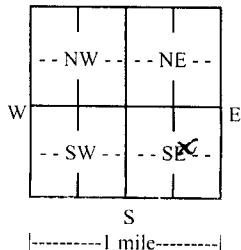
City: Wilson

State: KS

ZIP: 67530

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

N



## 4 DEPTH OF COMPLETED WELL: 155 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) 07/11/19.

☐ 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: 8 in. to ..... ft. and

..... in. to ..... ft.

## 5 Latitude: ..... (decimal degrees)

Longitude: ..... (decimal degrees)

Horizontal 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 (KGSORL)

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 ..... 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 0 ft. to 155 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) none in pasture

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	clay			
20	35	gray shale			
35	50	sand rock			
50	65	red shale			
65	105	sand rock streaks			
105	110	red shale			
110	150	grey shale			
150	155	red shale			

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) 07/11/19 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 186 This Water Well Record was completed on (mo-day-year) 07/12/19 under the business name of Kelly's Water Well Service, Inc. Signature *Kathryn L. Head*

Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section,

1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.

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

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