

**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources; App. No.  

<b>1 LOCATION OF WATER WELL:</b> County: <u>Ellis</u>	Fraction <u>1/4 NW 1/4 SW 1/4</u>	Section Number <u>4</u>	Township Number T <u>15</u> S	Range Number R <u>17</u> E/W
Distance and direction from nearest town or city street address of well if located within city?		<b>Global Positioning Systems</b> (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		

**2 WATER WELL OWNER:**  
RR#, St. Address, Box # : Mike Sprague  
677 300 Ave  
City, State, ZIP Code : Hays, KS 67601

**3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:**

N			
S			

**4 DEPTH OF COMPLETED WELL** 37 ft.

Depth(s) Groundwater Encountered (1) 26 ft. (2) \_\_\_\_\_ ft. (3) \_\_\_\_\_ ft.  
 WELL'S STATIC WATER LEVEL 26 ft. below land surface measured on mo/day/yr. \_\_\_\_\_  
 Pump test data: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Est. Yield 20 gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well  
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)  
 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well \_\_\_\_\_

Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_\_\_ No ; If yes, mo/day/yr  
 Sample was submitted \_\_\_\_\_ Water well disinfected? Yes \_\_\_\_\_ No \_\_\_\_\_

**5 TYPE OF CASING USED:**

1 Steel	3 RMP (SR)	5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
		7 Fiberglass		Threaded _____

Blank casing diameter 5 in. to 3.7 ft., Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft., Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface 14 in., Weight 160 lbs./ft. Wall thickness or gauge No. SPR 26

**TYPE OF SCREEN OR PERFORATION MATERIAL:**

1 Steel	3 Stainless Steel	5 Fiberglass	<u>7 PVC</u>	9 ABS	11 Other (Specify) _____
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RM (SR)	10 Asbestos-Cement	12 None used (open hole)

**SCREEN OR PERFORATION OPENINGS ARE:**

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	7 Torch cut	9 Drilled holes	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	<u>8 Saw Cut</u>	10 Other (specify) _____	

**SCREEN-PERFORATED INTERVALS:** From 3.7 ft. to 2.7 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**GRAVEL PACK INTERVALS:** From 3.7 ft. to 2.5 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**6 GROUT MATERIAL:** 1 Neat cement 2 Cement grout 3 Bentonite 4 Other \_\_\_\_\_

Grout Intervals: From 0 ft. to 20 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	13 Insecticide Storage	16 Other (specify below)
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	14 Abandoned water well	
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer Storage	<u>15 Oil well/gas well</u>	

Direction from well? S How many feet? 300

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	TOP SOIL			
2	16	CLAY			
16	21	SAND			
21	23	CLAY			
23	27	SAND			
27	29	CLAY			
29	34	SAND			
34	37	SHALE			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 9/25/07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 478 This Water Well Record was completed on (mo/day/year) 8/25/07 under the business name of Plannedwell Water Well by (signature) [Signature]

**INSTRUCTIONS:** Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.