# 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: Ness

| Fraction | Section Number | Township Number | Range Number |
|---|---|---|---|
| SW ¼ SE ¼ SE ¼ SW ¼ | 29 | T 16 S | R 24 ☐ E ☑ W |

**2 WELL OWNER:** Last Name: Kraus First: Weston
Business:
Address: 13098 DD Rd
Address:
City: Utica State: KS ZIP: 67584

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: ☐
1 mile east of Arnold on Hwy 4. 1 mile south and 1 mile east on the north side.

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

N
- - NW - - | - - NE - -
W | E
- - SW - - | - - SE - -
X
S
|----------1 mile---------|

**4 DEPTH OF COMPLETED WELL:** ……56…… 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: ….0…..gpm
Bore Hole Diameter: …..9….. in. to ……56…. ft. and
…… in. to …… ft.

**5 Latitude:** ……38.624000……(decimal degrees)
**Longitude:** ……-100.003000……(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:** ..2520……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 ……0…… ft., Diameter …… in. to …… ft., Diameter …… in. to …… ft.
Casing height above land surface ……0…… in. Weight …… lbs./ft. Wall thickness or gauge No. ..40……
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 ☐ Other (Specify) ……
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)
SCREEN-PERFORATED INTERVALS: From ..0…… ft. to ..1…… ft., From …… ft. to …… ft., From …… ft. to …… ft.
GRAVEL PACK INTERVALS: From ……0…… ft. to ……1…… ft., From …… ft. to …… ft., From …… ft. to …… ft.

**9 GROUT MATERIAL:** ☐ Neat cement ☐ Cement grout ☑ Bentonite ☑ Other ..Dirt……
Grout Intervals: From ……0…… ft. to ..20…… ft., From ..20…… ft. to ……56…… ft., From …… ft. to …… ft.
**Nearest source of possible contamination:** ✔ No potential source of contamination within 200 ft.
☐ 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 | 3 | Top dark soil | | | |
| 4 | 16 | Yellow clay | | | |
| 17 | 19 | Hard rock | | | |
| 20 | 36 | Yellow clay | | | |
| 37 | 48 | Yellow limestone | | | |
| 49 | 56 | Gray 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) ..08/28/2021….. and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ..827…… This Water Well Record was completed on (mo-day-year) ..09/22/2021…… under the business name of Evel Windmill Repair……

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 KSA 82a-1212