

# WATER WELL RECORD Form WWC-5

☒ Original Record ☐ Correction ☐ Change in Well Use

Division of Water  
Resources App. No.

12098

Well ID

<b>1 LOCATION OF WATER WELL:</b> County: GREELEY		Fraction SE 1/4 SE 1/4 NE 1/4 NE 1/4	Section Number 4	Township Number T 16 S	Range Number R 39 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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<b>2 WELL OWNER:</b> Last Name: WU Business: WU'S FARMLAND Address: 2450 CENTRAL AVE #P31P4 City: BOULDER State: CO ZIP: 80301		First: SHERMAN 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: <input type="checkbox"/> 13 S of Sharon Springs, 61/2 E to RD. R23, 3/8 S on West Side
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<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> 	<b>4 DEPTH OF COMPLETED WELL:</b> .....198..... ft. Depth(s) Groundwater Encountered: 1) .....164..... ft. 2) ..... ft. 3) ..... ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: .....164..... ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) .....7-17-15..... <input type="checkbox"/> above land surface, measured on (mo-day-yr) ..... Pump test data: Well water was .....180..... ft. after .....5..... hours pumping .....185..... gpm Well water was .....183..... ft. after .....24..... hours pumping .....155..... gpm Estimated Yield: .....155..... gpm Bore Hole Diameter: .....30..... in. to .....196..... ft. and .....17..... in. to .....198..... ft.	<b>5 Latitude:</b> 38DEG 41.745FT .....(decimal degrees) <b>Longitude:</b> 101DEG 37.351FT .....(decimal degrees) <b>Horizontal Datum:</b> <input type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input checked="" type="checkbox"/> NAD 27 <b>Source for Latitude/Longitude:</b> <input checked="" type="checkbox"/> GPS (unit make/model: GARMIN .....) (WAAS enabled? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: .....
	<b>6 Elevation:</b> 3555 .....ft. <input checked="" type="checkbox"/> Ground Level <input type="checkbox"/> TOC <b>Source:</b> <input type="checkbox"/> Land Survey <input checked="" type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other .....	

<b>7 WELL WATER TO BE USED AS:</b>		
1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock 2. <input checked="" type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial	5. <input type="checkbox"/> Public Water Supply: well ID ..... 6. <input type="checkbox"/> Dewatering: how many wells? ..... 7. <input type="checkbox"/> Aquifer Recharge: well ID ..... 8. <input type="checkbox"/> Monitoring: well ID ..... 9. Environmental Remediation: well ID ..... <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection	10. <input type="checkbox"/> Oil Field Water Supply: lease ..... 11. Test Hole: well ID ..... <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? ..... a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify): .....

Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☒ No If yes, date sample was submitted: .....  
 Water well disinfected? ☒ Yes ☐ No

<b>8 TYPE OF CASING USED:</b> <input checked="" type="checkbox"/> Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other ..... Casing diameter .....14..... in. to .....198..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft. Casing height above land surface .....12..... in. Weight .....32.26..... lbs./ft. Wall thickness or gauge No. .....219..... <b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input type="checkbox"/> PVC <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> None used (open hole) <input type="checkbox"/> Other (Specify) .....	<b>CASING JOINTS:</b> <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Threaded
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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 .....162..... ft. to .....182..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From .....197..... ft. to .....20..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

<b>9 GROUT MATERIAL:</b> <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Other Grout Intervals: From .....20..... ft. to .....+1..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.	<b>6 SACK CEMENT</b> .....
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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? NONE Distance from well? ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	TOP SOIL	172	182	COARSE SAND, MED. GRAVEL
2	22	BROWN CLAY, BR SANDY CLAY	182	184	OCHRE
22	42	ROCK 2'. BR SANDY CLAY	184	198	BLACK SHALE
42	74	SAND, MED. GRAVEL			
74	102	BROWN & GREEN CLAY, SAND			
102	122	SAND, SANDSTONE, SANDY CLAY			
122	142	SAND, CLAY, COARSE SAND			
142	162	FINE TO COARSE SAND			
162	172	FINE TO COARSE SAND			

**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) 7/17/15 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 633 This Water Well Record was completed on (mo-day-year) 12/18/15 under the business name of DMW WELL & PUMP SERVICE Signature *James T. H. H. H.*  
 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> KSA 82a-1212 Revised 7/10/2015