

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: _____ Fraction: 1/4 1/4 1/4 1/4 Section Number: _____ Township Number: T _____ S _____ Range Number: R _____ E _____ W _____

2 WELL OWNER: Last Name: _____ First: _____ 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:

3 LOCATE WELL WITH "X" IN SECTION BOX: N, E, S, W diagram with 'X' in NE. 4 DEPTH OF COMPLETED WELL: ft. Depth(s) Groundwater Encountered: 1) _____ ft. 2) _____ ft. 3) _____ ft., or 4) Dry Well. 5 Latitude: _____(decimal degrees) Longitude: _____(decimal degrees) Datum: WGS 84 NAD 83 NAD 27

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 _____. 10. Oil Field Water Supply: lease _____. 11. Test Hole: well ID _____. 12. Geothermal: how many bores? _____. 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 PVC Other (Specify) _____. SCREEN OR PERFORATION OPENINGS ARE: Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify) _____. 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 _____ ft. to _____ ft., From _____ ft. to _____ 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
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) _____ and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo-day-year) _____ under the business name of _____