

**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources App. No.  

<b>1 LOCATION OF WATER WELL:</b> County: <u>Norton</u>	Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ NW $\frac{1}{4}$	Section Number <u>6</u>	Township No. T <u>1</u> S	Range Number <u>R24</u> E <input type="checkbox"/> W <input checked="" type="checkbox"/>
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> <u>W10 &amp; A Rd.</u>		Global Positioning System (GPS) information: Latitude: <u>39° 59' 31.7"</u> (in decimal degrees) Longitude: <u>100° 04' 59.3"</u> (in decimal degrees) Elevation: ..... Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: .....) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m		
<b>2 WATER WELL OWNER:</b> <u>Jim Frack</u> RR#, Street Address, Box #: <u>708 Road W10</u> City, State, ZIP Code: <u>Norcaton, KS 66653</u>				

<b>3 LOCATE WELL WITH AN "X" IN SECTION BOX:</b> N <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table> S -----1 mile-----																	<b>4 DEPTH OF COMPLETED WELL</b> ..... <u>55</u> ..... ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL <u>41</u> ..... ft. below land surface measured on mo/day/yr. <u>5:17:12</u> ..... Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm EST. YIELD: <u>500</u> gpm. Well water was ..... ft. after ..... hours pumping ..... gpm Bore Hole Diameter <u>30</u> ..... in. to <u>55</u> ..... ft., and ..... in. to ..... ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well ..... Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted..... Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**5 TYPE OF CASING USED:**  Steel    PVC    Other .....

CASING JOINTS:  Glued    Clamped    Welded    Threaded

Casing diameter 1 1/2 in. to 55 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
 Casing height above land surface 12 in., Weight ..... lbs./ft., Wall thickness or gauge No. ....

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    None (open hole)  
 Louvered shutter    Key punched    Wire wrapped    Saw cut    Other (specify) .....

SCREEN-PERFORATED INTERVALS: From 35 ..... ft. to 55 ..... ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From 30 ..... ft. to 55 ..... ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**6 GROUT MATERIAL:**  Neat cement    Cement grout    Bentonite    Other .....

Grout Intervals: From 0 ..... ft. to 30 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination:  
 Septic tank    Lateral lines    Pit privy    Livestock pens    Insecticide storage    Other (specify below)  
 Sewer lines    Cesspool    Sewage lagoon    Fuel storage    Abandoned water well  
 Watertight sewer lines    Seepage pit    Feedyard    Fertilizer storage    Oil well/gas well .....

Direction from well ..... Distance from well .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	3	TOPSOIL			
3	34	Soft Tan Clay			
34	43	Fine gravel & coarse sand			
43	55	Med. coarse gravel & sand			
55	56	Rock			
56	60	Black Shale			
60	90	Black Shale (Hard)			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was  constructed,  reconstructed, or  plugged under my jurisdiction and was completed on (mo/day/year) 5:17:12 ..... and this record is true to the best of my knowledge and belief.  
 Kansas Water Well Contractor's License No. 133 ..... This Water Well Record was completed on (mo/day/year) 6:15:12 .....  
 under the business name of Sargent Irrigation Co. ..... by (signature) [Signature] .....

**INSTRUCTIONS:** Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) 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 copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.