

**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources; App. No.  

<b>1 LOCATION OF WATER WELL:</b> County: <u>Reno</u>	Fraction <u>SW 1/4 SW 1/4 SW 1/4</u>	Section Number <u>28</u>	Township Number <u>T 22 S</u>	Range Number <u>R 5 E <input checked="" type="radio"/></u>
Distance and direction from nearest town or city street address of well if located within city? <u>2513 E 45th in Hutchinson</u>		<b>Global Positioning Systems</b> (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		

**2 WATER WELL OWNER:** Lyle Housh  
RR#, St. Address, Box # : 2513 E 45th  
City, State, ZIP Code : Hutch, KS 67502

<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> N W E S	<table border="1" style="width: 100%; height: 100px; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;">NW</td> <td style="width: 25%; text-align: center;">NE</td> </tr> <tr> <td style="width: 25%; text-align: center;">SW</td> <td style="width: 25%; text-align: center;">SE</td> </tr> </table> <p style="text-align: center;">X</p>	NW	NE	SW	SE
NW	NE				
SW	SE				
<b>4 DEPTH OF COMPLETED WELL</b> ..... <u>80</u> ..... ft.					
Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL... <u>30</u> ..... ft. below land surface measured on mo/day/yr. <u>5-24-06</u> Pump test data: Well water was... <u>4.7</u> ..... ft. after... <u>2</u> ..... hours pumping... <u>2.5</u> ..... gpm Est. Yield.....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 <input checked="" type="radio"/> 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 <input checked="" type="checkbox"/> .....; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes <input checked="" type="checkbox"/> ..... No .....					

**5 TYPE OF CASING USED:**

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
<input checked="" type="radio"/> PVC	4 ABS	7 Fiberglass	

Blank casing diameter ..... 5 ..... in. to ..... 60 ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
 Casing height above land surface... 12 ..... in., Weight. 2.35 ..... lbs./ft. Wall thickness or gauge No. 160

**CASING JOINTS:** Glued..  ..... Clamped.....  
 Welded.....  
 Threaded.....

**TYPE OF SCREEN OR PERFORATION MATERIAL:**

1 Steel	3 Stainless Steel	5 Fiberglass	<input checked="" type="radio"/> PVC	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	<input checked="" type="radio"/> Saw Cut	10 Other (specify) .....	

**SCREEN-PERFORATED INTERVALS:** From... 60 ..... ft. to ..... 80 ..... ft., From ..... ft. to ..... ft.  
 From..... ft. to ..... ft., From ..... ft. to ..... ft.

**GRAVEL PACK INTERVALS:** From... 23 ..... ft. to ..... 40 ..... ft., From ..... ft. to ..... ft.  
 From... 45 ..... ft. to ..... 84 ..... ft., From ..... ft. to ..... ft.

**6 GROUT MATERIAL:** 1 Neat cement 2 Cement grout  Bentonite 4 Other .....

Grout Intervals: From ... 3 ..... ft. to ... 23 ..... ft., From ... 40 ..... ft. to ... 45 ..... ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination:

<input checked="" type="radio"/> 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	15 Oil well/gas well	

Direction from well? ... S-SW ..... How many feet? .. 100 .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Sandy Br silt	81	84	F Sand
3	11	Br clay			
11	18	F Sand			
18	23	Br Clay			
23	33	F Sand			
33	35	Br + Gr Clay			
35	39	F Sand			
39	59	Br + Gr Clay			
59	80	F Sand			
80	81	Br Clay			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was  constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) .. 5-24-06 .. and this record is true to the best of my knowledge and belief.  
 Kansas Water Well Contractor's License No. ... 447 .... This Water Well Record was completed on (mo/day/year) .. 6-3-06 .....  
 under the business name of Miller Drilling by (signature) J. Miller

**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.kdhe.state.ks.us/geo/waterwells>.