

## WATER WELL RECORD

Form WWC-5

1115829

Division of Water  
Resources App. No.

Well ID

☐ Original Record ☐ Correction ☐ Change in Well Use

## 1 LOCATION OF WATER WELL:

County:

Fraction

 $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ 

Section Number

Township Number

T S

Range Number

R ☐ E ☐ W

## 2 WELL OWNER: Last Name:

First:

Business:

Address:

Address:

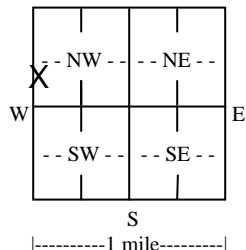
City:

State:

ZIP:

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



## 4 DEPTH OF COMPLETED WELL: ..... 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: .....gpm

Bore Hole Diameter: ..... in. to ..... ft. and

..... in. to ..... ft.

## 5 Latitude: .....(decimal degrees)

Longitude: .....(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: .....ft. ☐ Ground Level ☐ TOCSource: ☐ Land Survey ☐ GPS ☐ Topographic Map☐ Other .....

## 7 WELL WATER TO BE USED AS:

1. Domestic:

☐ Household☐ Lawn & Garden☐ Livestock2. ☐ Irrigation3. ☐ Feedlot4. ☐ Industrial5. ☐ 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 ☐ Injection10. ☐ Oil Field Water Supply: lease .....

11. Test Hole: well ID .....

☐ Cased ☐ Uncased ☐ Geotechnical

12. Geothermal: how many bores? .....

a) Closed Loop ☐ Horizontal ☐ Verticalb) Open Loop ☐ Surface Discharge ☐ Inj. of Water13. ☐ Other (specify): .....Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted: .....Water well disinfected? ☐ Yes ☐ No8 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 ☐ Fiberglass ☐ PVC☐ Other (Specify) .....☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ 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 ..... 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:

☐ 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 .....

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

Form	WWC5
Contractor	Hydro Resources Mid Continent, Inc.
Well Owner	Stan Linville
Doc ID	1115829

#### Litholgy

From	To	LithologicLog
0	2	TOP SOIL
2	32	BROWN CLAY
32	38	COARSE SAND SMALL GRAVEL
38	62	BROWN CLAY
62	87	BROWN CLAY MEDIUM SAND STREAKS
87	100	MED SAND FEW BROWN CLAY STREAKS
100	118	BROWN CLAY
118	122	BROWN CLAY MED SAND STREAKS
122	142	MED TO COARSE SAND SOME SMALL GRAVEL
142	166	SOFT BROWN CLAY
166	170	GYPSUM
170	190	COARSE SAND SMALL GRAVEL
190	198	LIGHT BROWN CLAY
198	222	MED TO COARSE SAND
222	237	BROWN CLAY GYPSUMFEW SMALL SAND STREAKS
237	254	MED TO COARSE SAND
254	260	BROWN CLAY COARSE SAND SMALL GRAVEL STREAKS

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Litholgy

From	To	LithologicLog
260	268	MED TO COARSE SAND
268	273	BROWN CLAY
273	292	FINE TO MED SAND
292	295	BROWN CLAY
295	322	MED TO COARSE SAND SOME SMALL GRAVEL
322	324	YELLOW SOAPSTONE