

**WATER WELL RECORD Form WWC-5**

Original Record  Correction  Change in Well Use

Division of Water Resources App. No.

Well ID

<b>1 LOCATION OF WATER WELL:</b> County: <u>PRATT</u>	Fraction <u>1/4 NW 1/4 NW 1/4 NW 1/4</u>	Section Number <u>5</u>	Township Number <u>T 26 S</u>	Range Number <u>R 12 E</u> <input checked="" type="checkbox"/> <u>W</u>
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**2 WELL OWNER:** Last Name: Griffith First: Clark  
 Business: \_\_\_\_\_  
 Address: 80425 NE 10th Ave.  
 Address: \_\_\_\_\_  
 City: Iuka State: KS ZIP: 67066  
 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:

<p><b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> N</p> <table style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> </tr> <tr> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> </tr> <tr> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> </tr> </table> <p style="text-align: center;">S -----1 mile-----</p>										<p><b>4 DEPTH OF COMPLETED WELL:</b> <u>93</u> ft.                  Depth(s) Groundwater Encountered: 1) _____ ft.                  2) _____ ft. 3) _____ ft., or 4) <input type="checkbox"/> Dry Well                  WELL'S STATIC WATER LEVEL: <u>20</u> ft.  <input type="checkbox"/> below land surface, measured on (mo-day-yr).....  <input checked="" type="checkbox"/> above land surface, measured on (mo-day-yr) <u>11-26-12</u>                  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: <u>10.78</u> in. to <u>93</u> ft. and _____ in. to _____ ft.</p>	<p><b>5 Latitude:</b> _____ (decimal degrees)  <b>Longitude:</b> _____ (decimal degrees)                  Datum: <input type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27  <b>Source for Latitude/Longitude:</b>  <input type="checkbox"/> GPS (unit make/model: _____)                  (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No)  <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map  <input type="checkbox"/> Online Mapper: _____</p>
<p><b>6 Elevation:</b> _____ ft. <input type="checkbox"/> Ground Level <input type="checkbox"/> TOC                  Source: <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map  <input type="checkbox"/> Other _____</p>											

**7 WELL WATER TO BE USED AS:**

1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input checked="" type="checkbox"/> Livestock <input type="checkbox"/> Irrigation <input type="checkbox"/> Feedlot <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): _____
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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 5 in. to 63 ft., Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft., Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface 36 in. Weight 160 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 63 ft. to 83 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
**GRAVEL PACK INTERVALS:** From 20 ft. to 93 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**9 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other \_\_\_\_\_  
 Grout Intervals: From 20 ft. to 0 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Nearest source of possible contamination:**

<input type="checkbox"/> Septic Tank	<input type="checkbox"/> Lateral Lines	<input type="checkbox"/> Pit Privy	<input type="checkbox"/> Livestock Pens	<input type="checkbox"/> Insecticide Storage
<input type="checkbox"/> Sewer Lines	<input type="checkbox"/> Cess Pool	<input type="checkbox"/> Sewage Lagoon	<input type="checkbox"/> Fuel Storage	<input type="checkbox"/> Abandoned Water Well
<input type="checkbox"/> Watertight Sewer Lines	<input type="checkbox"/> Seepage Pit	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Fertilizer Storage	<input type="checkbox"/> Oil Well/Gas Well
<input type="checkbox"/> Other (Specify) _____				

Direction from well? 999 Distance from well? 999 ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	5	powder sand			
5	15	BRN clay w/ sand			
15	20	white clay			
20	30	BRN clay / same lg. sand			
30	50	m-l sand / gravel			
50	70	small sand			
70	80	large sand & gravel			
80	85	small sand			
85	95	BRN clay			

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) 11-26-12 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 677 This Water Well Record was completed on (mo-day-year) 11-29-12 under the business name of Grandy's Well Service, Inc.

INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.