

# WATER WELL RECORD Form WWC-5

☐ Original Record ☐ Correction ☐ Change in Well Use

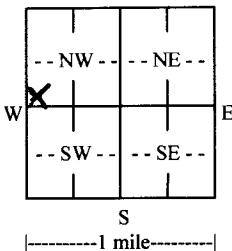
Division of Water  
Resources App. No.

Well ID

1 LOCATION OF WATER WELL: Fraction  $\frac{1}{4}$  SW  $\frac{1}{4}$  SW  $\frac{1}{4}$  NW Section Number 28 Township Number T 26 S Range Number R 34 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: ☐  
Business: Cattle Empire  
Address: Rt 1 Box 109 A  
Address: Satauta  
City: Satauta State: KS ZIP: 67870 13 miles South & 8 miles West of Garden City

3 LOCATE WELL WITH "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL: 447 ft.  
Depth(s) Groundwater Encountered: 1) ..... ft.  
2) ..... ft. 3) ..... ft., or 4) ☐ Dry Well  
WELL'S STATIC WATER LEVEL: 178 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: 59 gpm  
Bore Hole Diameter: 4 1/8 in. to 4 1/2 in. 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 ☐ TOC  
Source: ☐ Land Survey ☐ GPS ☐ Topographic Map  
☐ Other .....

## 7 WELL WATER TO BE USED AS:

- |   |  |                                     |  |  |   |   |   |   |  |                              |                                       |   |
|---|--|-------------------------------------|--|--|---|---|---|---|--|------------------------------|---------------------------------------|---|
| 1. Domestic:<br><input type="checkbox"/> Household<br><input type="checkbox"/> Lawn & Garden<br><input checked="" type="checkbox"/> Livestock | 2. <input type="checkbox"/> Irrigation | 3. <input type="checkbox"/> Feedlot | 4. <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 ..... | 10. <input type="checkbox"/> Oil Field Water Supply: lease ..... | 11. Test Hole: well ID ..... | 12. Geothermal: how many bores? ..... | 13. <input type="checkbox"/> 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. #20

## 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 487 ft. to 447 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
GRAVEL PACK INTERVALS: From 160 ft. to 447 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other .....  
Grout Intervals: From 5 ft. to 25 ft., From 15 ft. to 160 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 checked="" type="checkbox"/> Oil Well/Gas Well |
| <input type="checkbox"/> Other (Specify) .....  |  |  |   |   |

Direction from well? South Distance from well? 2500 ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	10	Sandy top soil			
10	150	Sand & Gravel			
150	170	Sand & Clay Layers			
170	207	Sand & Gravel			
207	320	Sand & Clay Layers			
320	410	Clay & Sand			
410	430	Clay w/ Sand streaks			
430	442	Clay			
442	447	Pink Clay - Tight			

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) 6-11-14 and this record is true to the best of my knowledge and belief.  
Kansas Water Well Contractor's License No. 805 This Water Well Record was completed on (mo-day-year) 7-11-14 under the business name of Southern Windmill

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.

Visit us at <http://www.kdheks.gov/waterwell/index.html>

KSA 82a-1212

Revised 9/10/2012