

**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: _____		Fraction 1/4   1/4   1/4   1/4		Section Number	Township Number T    S	Range Number R    E    W	
<b>2 WELL OWNER:</b> Last Name: _____ Business: _____ 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: <input type="checkbox"/>					
<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> N W                                      E S -----1 mile-----		<b>4 DEPTH OF COMPLETED WELL:</b> ..... ft. Depth(s) Groundwater Encountered: 1) ..... ft. 2) ..... ft. 3) ..... ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: ..... ft. <input type="checkbox"/> below land surface, measured on (mo-day-yr)..... <input type="checkbox"/> 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.		<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 Source for Latitude/Longitude: <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: .....			
<b>7 WELL WATER TO BE USED AS:</b>							
1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input 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 .....		<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): .....					
Was a chemical/bacteriological sample submitted to KDHE? <input type="checkbox"/> Yes <input type="checkbox"/> No    If yes, date sample was submitted: .....							
Water well disinfected? <input type="checkbox"/> Yes <input type="checkbox"/> No							
<b>8 TYPE OF CASING USED:</b> <input type="checkbox"/> Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other ..... CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> 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: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) ..... <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous Slot <input type="checkbox"/> Mill Slot <input type="checkbox"/> Gauze Wrapped <input type="checkbox"/> Torch Cut <input type="checkbox"/> Drilled Holes <input type="checkbox"/> Other (Specify) .....							
<input type="checkbox"/> Louvered Shutter <input type="checkbox"/> Key Punched <input type="checkbox"/> Wire Wrapped <input type="checkbox"/> Saw Cut <input type="checkbox"/> 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.							
<b>9 GROUT MATERIAL:</b> <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input type="checkbox"/> Bentonite <input type="checkbox"/> Other .....							
Grout Intervals: From ..... ft. to ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.							
Nearest source of possible contamination: No potential source of contamination within 200 ft.							
<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? ..... Distance from well? ..... ft.							
<b>10 FROM</b>		<b>TO</b>		<b>LITHOLOGIC LOG</b>			
				<b>Notes:</b>			
<b>11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <input type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> 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 .....							

Form	WWC5
Contractor	Hydro Resources Mid Continent, Inc. #145
Well Owner	
Doc ID	1519415

#### Lithology

From	To	LithologicLog
0	2	surface
2	11	sand fine
11	84	sand fine to large rock
84	113	brown sticky clay
113	136	brown, blue sticky clay
136	155	fine to med sand
155	215	brown sticky clay
215	245	sandy brown clay, sand, small gravel mix
245	284	brown sandy clay, fine sand mix
284	360	soapstone, some sandstone mix
360	380	sandstone, some soapstone mix
380	401	yellow sandstone, few brown rock, few soapstone strips
401	422	yellow brown sand stone
422	460	yellow sandstone, brown rock
460	505	sandstone, few brown rock
505	520	shale