



# WATER WELL RECORD

## Form WWC-5

1154381

Division of Water Resources App. No.

Well ID

Original Record  Correction  Change in Well Use

### 1 LOCATION OF WATER WELL:

Fraction

Section Number

Township Number

Range Number

County:

¼ ¼ ¼ ¼

T S

R  E  W

### 2 WELL OWNER: Last Name:

Business:  
Address:  
Address:  
City:

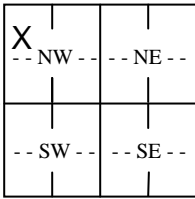
First:

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



S

-----1 mile-----

### 4 DEPTH OF COMPLETED WELL:

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 TOC

Source:  Land Survey  GPS  Topographic Map

Other .....

### 7 WELL WATER TO BE USED AS:

1. Domestic:

- Household
- Lawn & Garden
- Livestock

2.  Irrigation

3.  Feedlot

4.  Industrial

5.  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  Injection

10.  Oil Field Water Supply: lease .....

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

Cased  Uncased  Geotechnical

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

a) Closed Loop  Horizontal  Vertical

b) Open Loop  Surface Discharge  Inj. of Water

13.  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. ....

### 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

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	Layne Christensen Co.
Well Owner	
Doc ID	1154381

#### Litholgy

From	To	LithologicLog
0	18	top soil fine sand
18	32	fine sand tan clay
32	42	Fine Sand
43	180	Fine to Medium sand with clay lenses
180	211	Fine to Medium sand some medium gravel
211	300	Fine to course sand
300	363	Fine to Course sand with clay lenses
363	365	tan clay
365	368	Fine to medium sand
368	373	Tan sandy clay
373	380	Fine to course sand
380	418	tan clay with fine sand lenses
418	458	tan silty clay
458	505	fine sand trace shale
505	510	Fine Sand
510	522	Fine Cemented Sand
522	526	Shale
526	589	White sand very fine, took water
589	636	Sandy white clay, sandstone, trace of gray, red shale
636	643	Red shale & sandstone
643	647	Sandstone

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Litholgy

From	To	LithologicLog
647	648	White Clay
648	660	Red Shale