

# WATER WELL RECORD

## Form WWC-5

Division of Water Resources App. No. **20100131**

### 1 LOCATION OF WATER WELL:

County: **Haskell** Fraction  $\frac{1}{4}$  SE  $\frac{1}{4}$  SE  $\frac{1}{4}$  NE  $\frac{1}{4}$

Section Number **27**

Township Number **29**

Range Number **31**

☐ E ☒ W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐.

### Global Positioning System (GPS) information:

Latitude: \_\_\_\_\_ (in decimal degrees)

Longitude: \_\_\_\_\_ (in decimal degrees)

Elevation: \_\_\_\_\_

Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27

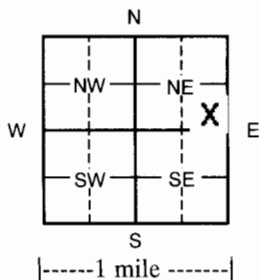
### Collection Method:

☐ GPS unit (Make/Model: \_\_\_\_\_)

☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey

Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

### 3 LOCATE WELL WITH AN "X" IN SECTION BOX:



### 4 DEPTH OF COMPLETED WELL **420** ft.

Depth(s) Groundwater Encountered (1) \_\_\_\_\_ ft. (2) \_\_\_\_\_ ft. (3) \_\_\_\_\_ ft.

WELL'S STATIC WATER LEVEL **na** ft. below land surface measured on mo/day/yr \_\_\_\_\_

Pump test data: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

EST. YIELD \_\_\_\_\_ gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

WELL WATER TO BE USED AS: ☐ Public water supply ☐ Geothermal ☐ Injection well

Domestic ☐ Feedlot ☒ Oil field water supply ☐ Dewatering ☐ Other (Specify below)

☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well

Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☒ No

If yes, mo/day/yr sample was submitted \_\_\_\_\_

Water Well Disinfected? ☒ Yes ☐ No

### 5 TYPE OF CASING USED:

☐ Steel ☒ PVC ☐ Other

CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded

Casing diameter **4.5** in. to **320** ft., Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft., Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft.

Casing height above land surface **18** in., Weight **2.38** lbs./ft. Wall thickness or gauge No. **.248**

### TYPE OF SCREEN OR PERFORATION MATERIAL:

☐ Steel ☐ Stainless Steel ☒ PVC ☐ Other (Specify) \_\_\_\_\_

☐ Brass ☐ Galvanized Steel ☐ None used (open hole)

### SCREEN OR PERFORATION OPENINGS ARE:

☐ Continuous Slot ☐ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole)

☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☒ Saw cut ☐ Other (specify) \_\_\_\_\_

SCREEN-PERFORATED INTERVALS: From **320** ft. to **420** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From **20** ft. to **420** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

### 6 GROUT MATERIAL:

☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other

Grout Intervals From **0** ft. to **20** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below)

☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well

☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well **None**

Direction from well \_\_\_\_\_ Distance from well \_\_\_\_\_

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Surface	147	154	Fine to med sand w/clay & caliche strks
2	12	Loess	154	185	Fine & med sd & sm gravel w/clay & caliche lens
12	28	Clay	185	238	Fine & med sand & med gravel w/caliche lenses
28	62	Clay w/caliche strks	238	265	Yellow ochre/blue shale
62	71	Clay & caliche w/sand lenses	265	283	Blue shale w/sand strks
71	80	Fine & med sand w/caliche strks & clay lenses	283	340	Fine to some med sand w/blue shale strks
80	109	Clay & caliche w/sand strks	340	420	Fine & med sand w/clay & caliche lenses
109	116	Fine sand w/clay & caliche strks			
116	120	Fine & med sand w/caliche strks & clay lenses			
120	147	Fine & med sd & small gravel w/clay & caliche lens			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo/day/year) **3-19-10** and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. **554 or 785**. This Water Well Record was completed on (mo/day/year) **3-26-2010**

under the business name of **Woofert Pump & Well Inc.** by (signature) *[Signature]*

**INSTRUCTIONS:** Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.