

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: County: <u>Kingman</u>		Fraction <u>1/4 SW 1/4 SW 1/4 SW 1/4</u>	Section Number <u>4</u>	Township Number T <u>28 29</u>	Range Number R <u>9</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W																																																						
2 WELL OWNER: Last Name: <u>Henning</u> First: <u>LEONARD</u> Business: Address: <u>10595 SW 70th St</u> Address: City: <u>Spivey</u> State: <u>KS</u> ZIP: <u>67142</u>		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"/> <u>1 1/2 miles West of New Calista Elevator</u>																																																									
3 LOCATE WELL WITH "X" IN SECTION BOX: N <div style="border: 1px solid black; width: 100px; height: 100px; margin: 10px auto; position: relative;"> <div style="position: absolute; top: 0; left: 0; width: 100%; height: 100%; border: 1px solid black; border-style: dashed;"> <div style="position: absolute; top: 0; left: 0; width: 50%; height: 50%; border: 1px solid black;">NW</div> <div style="position: absolute; top: 0; right: 0; width: 50%; height: 50%; border: 1px solid black;">NE</div> <div style="position: absolute; bottom: 0; left: 0; width: 50%; height: 50%; border: 1px solid black;">SW</div> <div style="position: absolute; bottom: 0; right: 0; width: 50%; height: 50%; border: 1px solid black;">SE</div> </div> <div style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); font-size: 2em;">X</div> </div> S <div style="border-top: 1px dashed black; width: 100%;"></div>	4 DEPTH OF COMPLETED WELL: <u>95</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>49</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>10-10-12</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 3/8</u> in. to <u>9 5/8</u> ft. and in. to ft.		5 Latitude: (decimal degrees) Longitude: (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:																																																								
	6 Elevation: 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																																																										
7 WELL WATER TO BE USED AS: 1. Domestic: <input checked="" 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 checked="" type="checkbox"/> No If yes, date sample was submitted: Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																																											
8 TYPE OF CASING USED: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other CASING JOINTS: <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded Casing diameter <u>5</u> in. to <u>7 1/2</u> ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface <u>24</u> in. Weight <u>160</u> 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"/> Fiberglass <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous Slot <input checked="" 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 <u>7 1/2</u> ft. to <u>9 5/8</u> ft., From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From <u>7 1/2</u> ft. to <u>20</u> ft., From ft. to ft., From ft. to ft.																																																											
9 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other Grout Intervals: From <u>20</u> ft. to <u>0</u> 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? <u>999</u> Distance from well? <u>999</u> ft.																																																											
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">10 FROM</th> <th style="width:10%;">TO</th> <th style="width:40%;">LITHOLOGIC LOG</th> <th style="width:10%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:20%;">LITHO. LOG (cont.) or PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td><u>0</u></td> <td><u>15</u></td> <td><u>Tan Top Soil</u></td> <td></td> <td></td> <td></td> </tr> <tr> <td><u>15</u></td> <td><u>25</u></td> <td><u>White Clay</u></td> <td></td> <td></td> <td></td> </tr> <tr> <td><u>25</u></td> <td><u>48</u></td> <td><u>Tan Sand</u></td> <td></td> <td></td> <td></td> </tr> <tr> <td><u>48</u></td> <td><u>59</u></td> <td><u>Tan Clay</u></td> <td></td> <td></td> <td></td> </tr> <tr> <td><u>59</u></td> <td><u>76</u></td> <td><u>Tan Sand</u></td> <td></td> <td></td> <td></td> </tr> <tr> <td><u>76</u></td> <td><u>95</u></td> <td><u>Tan Clay</u></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3"></td> <td colspan="3" rowspan="3">Notes:</td> </tr> <tr> <td colspan="3"></td> </tr> <tr> <td colspan="3"></td> </tr> </tbody> </table>						10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS	<u>0</u>	<u>15</u>	<u>Tan Top Soil</u>				<u>15</u>	<u>25</u>	<u>White Clay</u>				<u>25</u>	<u>48</u>	<u>Tan Sand</u>				<u>48</u>	<u>59</u>	<u>Tan Clay</u>				<u>59</u>	<u>76</u>	<u>Tan Sand</u>				<u>76</u>	<u>95</u>	<u>Tan Clay</u>							Notes:								
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11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo-day-year) <u>10-10-12</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>672</u> This Water Well Record was completed on (mo-day-year) <u>11-9-12</u> under the business name of <u>Cloud's Water Well Service</u>																																																											

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>

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