# 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: ~~Sedgwick~~ Sumner

Fraction: SE ¼ NW ¼ SW ¼ SW ¼ | Section Number: 11 | Township Number: T 30 S | Range Number: R 2 ☐ E ☒ W

**2 WELL OWNER:** Last Name: LINDAL First: David

Business:
Address: 12526 W. 111th St. S.
Address:
City: Clearwater State: Kansas ZIP: 67026

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: ☐

1314 N. Clearwater Rd. Clearwater, Kansas 67026

**3 LOCATE WELL WITH "X" IN SECTION BOX:**

N
NW | NE
W | E
SW | SE
x
S
|---------1 mile---------|

**4 DEPTH OF COMPLETED WELL:** 80 ft.
Depth(s) Groundwater Encountered: 1) ..... ft. 2) ..... ft. 3) ..... ft., or 4) ☐ Dry Well
WELL'S STATIC WATER LEVEL: 8 ft.
☒ below land surface, measured on (mo-day-yr) 09/29/22
☐ 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: 12 in. to 80 ft. and ..... in. to ..... ft.

**5 Latitude:** 37.44857 (decimal degrees)
**Longitude:** -97.51244 (decimal degrees)
Horizontal Datum: ☒ WGS 84 ☐ NAD 83 ☐ NAD 27
Source for Latitude/Longitude:
☒ GPS (unit make/model: iPhone) (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 5 in. to 80 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.
Casing height above land surface 12 in. Weight 2.35 lbs./ft. Wall thickness or gauge No. SDR-26
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 40 ft. to 80 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From 24 ft. to 80 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**9 GROUT MATERIAL:** ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other .....
Grout Intervals: From 4 ft. to 24 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? East Distance from well? 630+ ft.

| 10 FROM | TO | LITHOLOGIC LOG | FROM | TO | LITHO. LOG (cont.) or PLUGGING INTERVALS |
|---|---|---|---|---|---|
| 0 | 3 | topsoil | | | |
| 3 | 18 | clay | | | |
| 18 | 80 | gray shale | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | 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) 09/29/2022 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 236 This Water Well Record was completed on (mo-day-year) 9/30/2022 under the business name of Harp Well and Pump Service Signature Todd S. Harp

Mail 1 white copy along with a fee of $5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.

Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 **Revised 7/10/2015**