



**WATER WELL RECORD Form WWC-5 1325077**

Division of Water Resources App. No. [ ]

Well ID [ ]

- Original Record    Correction    Change in Well Use

**1 LOCATION OF WATER WELL:** County: [ ] Fraction: 1/4, 1/4, 1/4, 1/4   Section Number: [ ] Township Number: T, S   Range Number: R, E, W

**2 WELL OWNER:** Last Name: [ ] First: [ ] 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:  Business: [ ] Address: [ ] City: [ ] State: [ ] ZIP: [ ]

**3 LOCATE WELL WITH "X" IN SECTION BOX:** N  
W [ ] [ ] [ ] [ ] E  
S  
-----1 mile-----

**4 DEPTH OF COMPLETED WELL:** ..... ft. 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
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 .....