

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Stevens	Fraction $\frac{1}{4}$ NE $\frac{1}{4}$ NE $\frac{1}{4}$ NE $\frac{1}{4}$	Section Number 14	Township No. T 33 S	Range Number R 38 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☒.

2 WATER WELL OWNER: Dwayne Hull RR#, Street Address, Box #: 998 Rd P City, State, ZIP Code : Hugoton, KS 67951	Global Positioning System (GPS) information: Latitude: 37.1833 (in decimal degrees) Longitude: 101.4122 (in decimal degrees) Elevation: _____ Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: Garmin) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m
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3 LOCATE WELL WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> </div>	4 DEPTH OF COMPLETED WELL 478 Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL _____ 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 Bore Hole Diameter 9 7/8 in. to _____ ft., and _____ in. to _____ ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, mo/day/yr sample was submitted _____ Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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5 TYPE OF CASING USED: ☒ Steel ☐ PVC ☐ Other Eagle Loc

CASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ☐ Threaded

Casing diameter 5 in. to 478 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.

Casing height above land surface 24 in., Weight SDR 17 lbs./ft., Wall thickness or gauge No. _____

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 378 ft. to 398 ft., From 418 ft. to 438 ft.
 From 458 ft. to 478 ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 21 ft. to 478 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other _____

Grout Intervals: From 0 ft. to 21 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
 Direction from well NA Distance from well _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	20	Topsoil & Clay	380	440	Fine to Medium Sand Streaks of Clay
20	40	Fine Sand Streaks of Clay	440	460	Medium to Coarse Sand
40	60	Sand & Gravel	460	475	Sand, Sandstone
60	100	Clay Little Cliche	475	480	Red Bed
100	120	Clay Streaks of Sand			
120	220	Fine Sand Little Clay & Cliche			
220	280	Medium to Coarse Sand Little Clay			
280	300	Medium Sand Little Clay			
300	360	Fine to Medium Sand Streaks of Clay			
360	380	Fine Sand Streaks of Clay			

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) 8-28-11 and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. 473 This Water Well Record was completed on (mo/day/year) 8-31-11
 under the business name of Tyler Water Well Inc. by (signature) _____

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. 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 copy 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>.