

## WATER WELL RECORD

## Form WWC-5

Division of Water Resources App. No. 

<b>1 LOCATION OF WATER WELL:</b> County: STEVENS CO KS	Fraction $\frac{1}{4}$ $\frac{1}{4}$ NW $\frac{1}{4}$ SE $\frac{1}{4}$	Section Number 3	Township No. T 35 S	Range Number R 38 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> 51 & rd 12: W on 51 to hwy 25, S 8 m to rd D, to 7, 17/10 S to 2 trk drwy, 3/10 to E side		<b>Global Positioning System (GPS) information:</b> Latitude: ..... (in decimal degrees) Longitude: ..... (in decimal degrees) Elevation: ..... Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model: .....) <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		
<b>2 WATER WELL OWNER:</b> BRECHERSON, GAYLEN RR#, Street Address, Box #: 312 RD 7 City, State, ZIP Code : HUGOTON KS 67951				

<b>3 LOCATE WELL WITH AN "X" IN SECTION BOX:</b> <div style="text-align: center;">N</div> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="padding: 5px;">NW</td> <td style="padding: 5px;">NE</td> </tr> <tr> <td style="padding: 5px;">SW</td> <td style="padding: 5px; text-align: center;">X SE</td> </tr> </table> <div style="text-align: center;">S</div> <div style="text-align: center;">-----1 mile-----</div>	NW	NE	SW	X SE	<b>4 DEPTH OF COMPLETED WELL</b> 580 ..... ft. Depth(s) Groundwater Encountered (1) 200 ..... ft. (2) ..... ft. (3) ..... ft. WELL'S STATIC WATER LEVEL 200 ..... ft. below land surface measured on mo/day/yr. 9-10-13 ..... Pump test data: Well water was 250 ..... ft. after 1 ..... hours pumping 100 ..... gpm EST. YIELD 100 ..... gpm. Well water was ..... ft. after ..... hours pumping ..... gpm Bore Hole Diameter 10.75 ..... in. to 580 ..... 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 checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted ..... Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
NW	NE				
SW	X SE				

**5 TYPE OF CASING USED:** ☐ Steel ☒ PVC ☐ Other .....

**CASING JOINTS:** ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded

Casing diameter .6 ..... in. to 580 ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
 Casing height above land surface 24 ..... in., Weight 4.074 ..... lbs./ft., Wall thickness or gauge No. SDR 21-316 .....

**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 480 ..... ft. to 580 ..... ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**GRAVEL PACK INTERVALS:** From 190 ..... ft. to 580 ..... 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 1 ..... ft. to 25 ..... 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 ..... Distance from well .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVAL
0	4	TOP SOIL	298	312	SAND
4	18	TAN CLAY	312	355	COARSE SAND
18	47	CLAY/SANDY CLAY	355	384	MED. SAND
47	72	SANDY CLAY	384	505	SANDSTONE/SAND
72	110	SAND	505	551	FINE SAND/CLAY STREAKS
110	148	SANDY CLAY	551	575	SANDSTONE/SAND
148	196	SAND/CLAY STREAKS	575	585	SAND/SANDY CLAY
196	227	SAND/SANDSTONE			
227	254	SAND/PINK CLAY			
254	298	MED. SAND			

**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) 9-10-13 ..... and this record is true to the best of my knowledge and belief.  
 Kansas Water Well Contractor's License No. 430 ..... This Water Well Record was completed on (mo/day/year) 9-10-13 .....  
 under the business name of Howard Ding Co Box 806 Beaver ok 73932 by (signature) *Phu Howard*

**INSTRUCTIONS:** Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367.  
 Telephone 785-296-5524. 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>