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:

	Fraction ¼ ¼ ¼ ¼	Section Number	Township Number T S	Range Number R ☐ E ☐ W
County:				

2 WELL OWNER: Last Name: _____ First: _____

Business: _____

Address: _____

Address: _____

City: _____ State: _____ ZIP: _____

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: ☐

3 LOCATE WELL WITH "X" IN SECTION BOX:

N

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- - NW - - | - - NE - -
W                      E
- - SW - - | - - SE - -  X
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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   ☐ 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   ☐ 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: No potential source of contamination within 200 ft.

☐ 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 ……………………………………………………………………………………………………...