||||||||||||||| 1275790

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: _____

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

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

X

- - NW - -   - - NE - -

W   E

- - SW - -   - - SE - -

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 ……...

Form	WWC5
Contractor	Woofter Pump and Well, Inc.
Well Owner	Ron Jacobs
Doc ID	1275790

Litholgy

From	To	LithologicLog
0	2	surface
2	28	loess
28	45	clay w/caliche lenses
45	75	clay caliche sand lenses
75	77	caliche
77	79	clay w/caliche strks
79	80	caliche
80	87	clay w/sand strks
87	104	clay
104	113	sand
113	115	clay & caliche
115	120	sand
120	130	clay
130	137	sand w/clay
137	154	caliche w/clay
154	157	med sand
157	160	clay w/sand lenses
160	163	clay
163	176	clay caliche & sand strks
176	189	clay & caliche sticky
189	194	sand med
194	195	caliche
195	196	clay
196	203	med sand

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Litholgy

From	To	LithologicLog
203	208	clay & sand lenses
208	210	shale