

WATER WELL RECORD

Form WWC-5

1161364

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

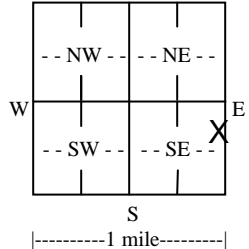
2 WELL OWNER: Last Name:

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: Address: City: State: ZIP:

3 LOCATE WELL WITH 'X' IN SECTION BOX:



4 DEPTH OF COMPLETED WELL:

Depth(s) Groundwater Encountered: 1) ... ft. 2) ... ft. 3) ... ft., or 4) Dry Well
WELL'S STATIC WATER LEVEL: ... ft.
Pump test data: Well water was ... ft. after ... hours pumping ... gpm

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
10. Oil Field Water Supply: lease
11. Test Hole: well ID
12. Geothermal: how many bores?
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.

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, LITHO. LOG (cont.) or PLUGGING INTERVALS. Includes a Notes section.

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.

Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.
KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212