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
- - 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)
Horizontal 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 ……Signature ……

Mail 1 white copy along with a fee of $5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.

Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 **Revised 7/10/2015**