

## WATER WELL RECORD

## Form WWC-5

Division of Water Resources App. No.

## 1 LOCATION OF WATER WELL:

County: Merri

Fraction

1/4 SW 1/4 NE 1/4 SE 1/4

Section Number

9

Township No.

T 16 S

Range Number

R 3 E ☒ WStreet/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☒.

## Global Positioning System (GPS) information:

Latitude: ..... (in decimal degrees)

Longitude: ..... (in decimal degrees)

Elevation: .....

Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27

## Collection Method:

☐ GPS unit (Make/Model: .....☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land SurveyHorizontal Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

## 2 WATER WELL OWNER:

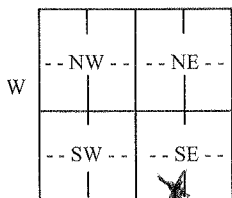
RR#, Street Address, Box #:

City, State, ZIP Code

Visser Radiator2440 T AveHerrington/K 67449

## 3 LOCATE WELL WITH AN "X" IN SECTION BOX:

N



W

E

S

-----1 mile-----

## 4 DEPTH OF COMPLETED WELL ..... ft.

Depth(s) Groundwater Encountered (1) 99 ft. (2) ..... ft. (3) ..... ft.WELL'S STATIC WATER LEVEL 13 ft. below land surface measured on mo/day/yr. 5-7-12

Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm

EST. YIELD. 20 gpm Well water was ..... ft. after ..... hours pumping ..... gpmBore Hole Diameter ..... in. to 12.0 ft., and ..... in. to ..... ft.WELL WATER TO BE USED AS: ☐ Public water supply ☐ Geothermal ☐ Injection well☒ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below)☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring wellWas a chemical/bacteriological sample submitted to Department? ☐ Yes ☒ No

If yes, mo/day/yr sample was submitted.....

Water well disinfected? ☒ Yes ☐ No

## 5 TYPE OF CASING USED:

☐ Steel ☒ PVC ☐ Other .....CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ ThreadedCasing diameter ..... in. to 12.0 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.Casing height above land surface ..... 12 in., Weight SDR26 lbs./ft., Wall thickness or gauge No. 214

## 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 0 ft. to 120 ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From 20 ft. to 120 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 0 ft. to 20 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 wellDirection from well E Distance from well 150

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
<u>0</u>	<u>4</u>	<u>Clay</u>	<u>99</u>	<u>100</u>	<u>Water</u>
<u>4</u>	<u>24</u>	<u>lime</u>			
<u>24</u>	<u>48</u>	<u>Blue Gray Shale</u>	<u>100</u>	<u>110</u>	<u>Yellow Shale</u>
<u>48</u>	<u>60</u>	<u>Red Shale</u>	<u>110</u>	<u>120</u>	<u>Blue-Gray Shale</u>
<u>60</u>	<u>75</u>	<u>lime</u>			
<u>75</u>	<u>85</u>	<u>lime</u>			
<u>85</u>	<u>86</u>	<u>limestone creviss</u>			
<u>86</u>	<u>98</u>	<u>lime</u>			
<u>98</u>	<u>95</u>	<u>Yellow Shale</u>			
<u>95</u>	<u>99</u>	<u>lime</u>			

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) 5-7-12, and this record is true to the best of my knowledge and belief.Kansas Water Well Contractor's License No. 180 This Water Well Record was completed on (mo/day/year) 5-13-12under the business name of Backhus Drilling by (signature) Paul Backhus

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) 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>.