

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: **HARVEY**

Fraction

Nw 1/4 Sec 4

Section Number

29

Township Number

T 23 S

Range Number

R 1 E W

2 WELL OWNER: Last Name:

Mullins

First:

Ken

Business:

137 Springdale Dr

Address:

City:

Newton

State:

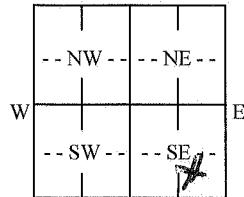
Ks

ZIP: **67114**

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



S

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

4 DEPTH OF COMPLETED WELL:

Depth(s) Groundwater Encountered: 1) **78** ft.

2) **65** ft. 3) ft. or 4) ☐ Dry Well

WELL'S STATIC WATER LEVEL: **20** ft.

☐ below land surface, measured on (mo-day-yr).....

☐ above land surface, measured on (mo-day-yr) **6-8-13**

Pump test data: Well water was ft.

after..... hours pumping gpm

Well water was ft.

after..... hours pumping gpm

Estimated Yield: **2-4** gpm

Bore Hole Diameter: **8.25** in. to **30** ft. and

7.25 in. to **78** 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 **SDR 26** lbs./ft. Wall thickness or gauge No. **12/4**

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 **15** ft. to **25** ft., From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From **55** ft. to **78** ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL:

☐ Neat cement

☐ Cement grout

☐ Bentonite

☐ Other

Grout Intervals: From **0** ft. to **15** 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? **S** Distance from well? **25** ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	16	Clay			
16	21	Sand some water			
21	65	Blue Shale			
65	66	little water			
66	78	Blue + Gray Shale			

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) **6-8-13** 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) **6-17-13** under the business name of **Backhaus Drilling**

INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.

Visit us at <http://www.kdheks.gov/waterwell/index.html>

KSA 82a-1212

Revised 9/10/2012