

**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 (DPL) Fraction: 1/4 NW 1/4 SW 1/4 NW 1/4 Section Number: 5 Township Number: T 23 S Range Number: R 1 E  W

**2 WELL OWNER:** Last Name: Voth First: Cameron 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: 511 W. Wittmarson  
 Address: N. Newton  
 City: \_\_\_\_\_ State: Ks ZIP: 67114

**3 LOCATE WELL WITH "X" IN SECTION BOX:**

N

	NW	NE	
X			
W			E
	SW	SE	
	S		

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

**4 DEPTH OF COMPLETED WELL:** 90 ft.  
 Depth(s) Groundwater Encountered: 1) 35 ft.  
 2) 50 ft. 3) \_\_\_\_\_ ft., or 4)  Dry Well  
 WELL'S STATIC WATER LEVEL: 15 ft.  
 below land surface, measured on (mo-day-yr).  
 above land surface, measured on (mo-day-yr) 12-16-13  
 Pump test data: Well water was \_\_\_\_\_ gpm  
 after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Well water was \_\_\_\_\_ ft.  
 after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Estimated Yield: 20 gpm  
 Bore Hole Diameter: 7.5 in. to 6.0 in. and 9.0 in. to 9.0 in.

**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: <input type="checkbox"/> Household <input checked="" type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock 2. <input type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial	5. <input type="checkbox"/> Public Water Supply: well ID _____ 6. <input type="checkbox"/> Dewatering: how many wells? _____ 7. <input type="checkbox"/> Aquifer Recharge: well ID _____ 8. <input type="checkbox"/> Monitoring: well ID _____ 9. Environmental Remediation: well ID _____ <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection	10. <input type="checkbox"/> Oil Field Water Supply: lease _____ 11. Test Hole: well ID _____ <input checked="" type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? _____ a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify): _____
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**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: SDB 2.0 lbs./ft. Wall thickness or gauge No. 2.14  
**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 30 ft. to 50 ft., From 70 ft. to 90 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
**GRAVEL PACK INTERVALS:** From 20 ft. to 50 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**9 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other \_\_\_\_\_  
 Grout Intervals: From 0 ft. to 20 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Nearest source of possible contamination:**

<input type="checkbox"/> Septic Tank	<input type="checkbox"/> Lateral Lines	<input type="checkbox"/> Pit Privy	<input type="checkbox"/> Livestock Pens	<input type="checkbox"/> Insecticide Storage
<input type="checkbox"/> Sewer Lines	<input type="checkbox"/> Cess Pool	<input type="checkbox"/> Sewage Lagoon	<input type="checkbox"/> Fuel Storage	<input type="checkbox"/> Abandoned Water Well
<input checked="" type="checkbox"/> Watertight Sewer Lines	<input type="checkbox"/> Seepage Pit	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Fertilizer Storage	<input type="checkbox"/> Oil Well/Gas Well
<input type="checkbox"/> Other (Specify) _____				

Direction from well? N.E. Distance from well? 15 ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	27	Top Soil + yellow clay			
27	35	Sandy Clay			
35	45	fine to med Sand			
45	80	Blue Shale			
80	81	Crumbled Shale + water			
81	90	Blue 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) 12-16-13 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) 12-22-13 under the business name of Backhus Drilling