

WATER WELL RECORD Form WWC-5

Original Record Correction Change in Well Use

Division of Water
Resources App. No.

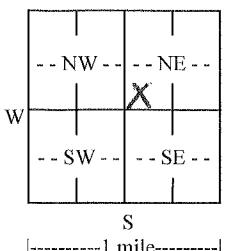
Well ID

1 LOCATION OF WATER WELL:		Fraction County: <i>Butler</i> <i>1/4 SW 1/4 SW 1/4 NE 1/4</i>	Section Number 9	Township Number T 24 S	Range Number R 6 E W
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2 WELL OWNER: Last Name: <i>Ferren</i> First: <i>David</i>		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: <input type="checkbox"/>			
Business: <i>16507 NW Kickapoo</i>					
Address: <i>16507 NW Kickapoo</i>					
Address: <i>Burns</i>					
City: <i>Burns</i> State: <i>Ks</i> ZIP: <i>66840</i>		<i>1/2 S Burns</i>			

3 LOCATE WELL WITH "X" IN SECTION BOX:

N



4 DEPTH OF COMPLETED WELL: <i>75</i> ft.	
Depth(s) Groundwater Encountered: 1) <i>35</i> ft.	
2) <i>35</i> ft. 3) <i>60</i> ft. or 4) <input type="checkbox"/> Dry Well	
WELL'S STATIC WATER LEVEL: <i>70</i> ft.	
<input type="checkbox"/> below land surface, measured on (mo-day-yr).....	
<input checked="" type="checkbox"/> above land surface, measured on (mo-day-yr) <i>12-19-13</i>	
Pump test data: Well water was ft.	
after hours pumping gpm	
Well water was ft.	
after hours pumping gpm	
Estimated Yield <i>40</i> gpm	
Bore Hole Diameter: <i>8.2</i> in. to <i>25</i> ft. and in. to 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 Public Water Supply: well ID

2. Irrigation Dewatering: how many wells?

3. Livestock Aquifer Recharge: well ID

4. Feedlot Monitoring: well ID

5. Industrial Environmental Remediation: well ID

6. Air Sparge Soil Vapor Extraction

7. 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 *5* in. to *13* ft., Diameter in. to ft., Diameter in. to ft.
Casing height above land surface *24* in. Weight *SDR 26* lbs./ft. Wall thickness or gauge No. *214*

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 *20* ft. to *75* ft., From ft. to ft., From ft. to ft. to ft.

GRAVEL PACK INTERVALS: From *20* ft. to *75* ft., From ft. to ft., From ft. to 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:

<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 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? *East* Distance from well? *None within 1000 ft.* ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
<i>0</i>	<i>3</i>	<i>Top Soil</i>			
<i>3</i>	<i>35</i>	<i>Brown Clay + Shale</i>			
<i>35</i>		<i>Some Water</i>			
<i>35</i>	<i>60</i>	<i>Blue + Yellow Shale</i>			
<i>60</i>	<i>61</i>	<i>Some Water</i>			
<i>61</i>	<i>75</i>	<i>Blue + Gray Shale</i>			
			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) *12-19-13* 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) *12-30-13* under the business name of *Backhouse 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>

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