

**WATER WELL RECORD Form WWC-5 KSA 82a-1212**

1 LOCATION OF WATER WELL: County: <b>Clay</b>	Fraction <b>NW</b> ¼ <b>NE</b> ¼ <b>NE</b> ¼	Section Number <b>24</b>	Township Number <b>T 10 S</b>	Range Number <b>R 1 E</b>
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Distance and direction from nearest town or city street address of well if located within city?  
**3 1/2 Miles East of Longford, KS**

2 WATER WELL OWNER: **Fred Heigle**  
 RR#, St. Address, Box # : **R.R.** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : **Longford, KS 67458** Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL <b>42</b> ft. ELEVATION:
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Depth(s) Groundwater Encountered 1. **29** ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL **29** ft. below land surface measured on mo/day/yr **10-26-90**

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

Est. Yield **8-10** gpm: Well water was **32** ft. after **1/2** hours pumping **8** gpm

Bore Hole Diameter **8** in. to **44** in. and \_\_\_\_\_ in. to \_\_\_\_\_ in.

WELL WATER TO BE USED AS:

5 Public water supply	8 Air conditioning	11 Injection well
1 <u>Domestic</u>	3 Feedlot	6 Oil field water supply
2 Irrigation	4 Industrial	7 Lawn and garden only
		10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_\_\_ No **X**; If yes, mo/day/yr sample was submitted \_\_\_\_\_

Water Well Disinfected? Yes **X** No

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: Glued <b>X</b> Clamped _____
2 <u>PVC</u>	4 ABS	7 Fiberglass		Welded _____
				Threaded _____

Blank casing diameter **5** in. to **32** ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.

Casing height above land surface **12** in., weight **2.37** lbs./ft. Wall thickness or gauge No. **214**

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	11 Other (specify) _____
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 <u>Mill slot</u>	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify) _____	

SCREEN-PERFORATED INTERVALS: From **32** ft. to **42** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From **25** ft. to **42** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other \_\_\_\_\_

Grout Intervals: From **5** ft. to **25** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 <u>Livestock pens</u>	14 Abandoned water well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
			13 Insecticide storage	

Direction from well? **North** How many feet? **100 ft**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Top Soil			
3	15	Clay			
15	24	Sandy Clay			
24	40	Creek Gravel			
40	44	Shale			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **10-26-90** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **138** This Water Well Record was completed on (mo/day/yr) **10-30-90** under the business name of **Peterson Irrigation, Inc.** by (signature) *Mike Peterson*

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.