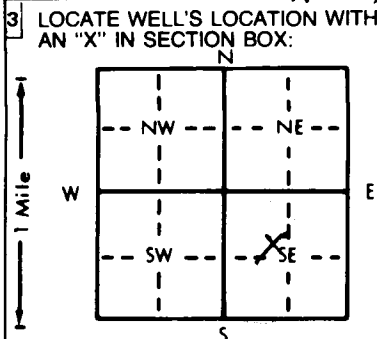


WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: **WABAUNSEE** Fraction: **SE 1/4 NW 1/4 SE 1/4** Section Number: **22** Township Number: **T 12 S** Range Number: **R 9 EW**

Distance and direction from nearest town or city street address of well if located within city?
7 miles west of Alma, KS 1/2 mile South

2 WATER WELL OWNER: **Robert Sommer**
 RR#, St. Address, Box #: **Route 1 Box 103**
 City, State, ZIP Code: **Alma, KS 66401**
 Board of Agriculture, Division of Water Resources
 Application Number:



4 DEPTH OF COMPLETED WELL: **72** ft. ELEVATION: **-**
 Depth(s) Groundwater Encountered 1. **33** ft. 2. **-** ft. 3. **-** ft.
 WELL'S STATIC WATER LEVEL **29** ft. below land surface measured on mo/day/yr **4/14/98**
 Pump test data: Well water was **-** ft. after **-** hours pumping **-** gpm
 Est. Yield **5+** gpm; Well water was **-** ft. after **-** hours pumping **-** gpm
 Bore Hole Diameter: **8.625** in. to **7.2** in. and **-** in. to **-** in.
 WELL WATER TO BE USED AS:
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 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 CASING USED:
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below)
 2 PVC 4 ABS 7 Fiberglass
 Blank casing diameter **5** in. to **52** ft. Dia. **-** in. to **-** ft. Dia. **-** in. to **-** ft.
 Casing height above land surface **24** in., weight **-** lbs./ft. Wall thickness or gauge No. **SDR26**
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify)
 3 Cast iron 9 ABS 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes
 3 Torched cut 10 Other (specify)
 SCREEN-PERFORATED INTERVALS: From **52** ft. to **72** ft., From **-** ft. to **-** ft.
 SAND TRAVEL PACK INTERVALS: From **23** ft. to **72** ft., From **-** ft. to **-** ft.
 From **-** ft. to **-** ft., From **-** ft. to **-** ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
 Grout Intervals: From **3** ft. to **23** ft., From **-** ft. to **-** 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 Livestock pens 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 west**
 How many feet? **1000+**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	4	soil, clay, brown			
4	12	limestone, tan			
12	31	shale, blue grey			
31	33	limestone, grey			
33	60	shale, grey			
60	69	redstone, grey			
69	72	limestone, grey			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **4/14/98** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **585** This Water Well Record was completed on (mo/day/yr) **4/20/98** under the business name of **AEI** by (signature) **Robert Sommer**

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 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

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