

WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Dickinson</u>	<u>NE 1/4 NE 1/4 NE 1/4</u>	<u>24</u>	<u>T 13 S</u>	<u>R 1W N 1/2E</u>

Distance and direction from nearest town or city street address of well if located within city? EAST
2 1/2 miles West of Abilene, Ks from Hwy 15 on 1st st West

2 WATER WELL OWNER: Scott Garten
 RR#, St. Address, Box # : 2199 Fair Rd. Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Abilene, Kansas 67410 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL <u>30</u> ft. ELEVATION:
	Depth(s) Groundwater Encountered 1. <u>19</u> ft. 2. _____ ft. 3. _____ ft.
	WELL'S STATIC WATER LEVEL <u>9'</u> above/below land surface measured on mo/day/yr <u>5</u> / <u>30</u> / <u>00</u>
	Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
	Est. Yield <u>25+</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
Bore Hole Diameter. <u>1.1</u> in. to <u>1.7</u> in. and <u>6</u> ft. to <u>9</u> ft. to <u>30</u> ft.	
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well	
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)	
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well	
Was a chemical/bacteriological sample submitted to Department? Yes. _____ No. <u>*</u> ; If yes, mo/day/yrs sample was submitted _____	
Water Well Disinfected? Yes <u>*</u> No _____	

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued. <u>*</u> Clamped. _____
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded. _____
		7 Fiberglass		Threaded. _____

Blank casing diameter 5 in. to 30 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 40 in., weight 160 lbs./ft. Wall thickness or gauge No. 214

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	<u>7 PVC</u>	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	8 RMP (SR)	11 Other (specify) _____
			9 ABS	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	<u>3 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 19 ft. to 30 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 1.7 ft. to 6 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 2 ft. to 17 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	<u>10 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? 80

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	DARK FINE SAND			
3	11	BROWN FINE SAND			
11	19	SOFT LIMESTONE			
19	20	HARD LIMESTONE			
20	25	LIMESTONE FRACTURES & SAND			
25	30	GRAY 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) 5 / 30 / 00 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. 397 This Water Well Record was completed on (mo/day/yr) 6 / 14 / 00 under the business name of CENTRAL KANSAS DRILLING by (signature) Harold D. Martin

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 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.