

2511051 WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: Dickinson Fraction: NE 1/4 NE 1/4 NE 1/4 Section Number: 3 Township Number: T 16 S Range Number: R 3 E

Distance and direction from nearest town or city street address of well if located within city? N. Main, Hope, KS

2 WATER WELL OWNER: North Central Kansas Corp Board of Agriculture, Division of Water Resources
 RR#, St. Address, Box #: P.O. Box 157
 City, State, ZIP Code: Hope, KS 67451 Application Number: _____

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N	
NW	NE
SW	SE
S	

4 DEPTH OF COMPLETED WELL: 84' ft. ELEVATION: 1383.57 TOC

Depth(s) Groundwater Encountered 1. 40' ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL 38.80 ft. below land surface measured on mo/day/yr 1/9/96

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

Est. Yield _____ gpm Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter 7" in. to 84' ft. and _____ in. to _____ ft.

WELL WATER TO BE USED AS:

1 Domestic	3 Feedlot	6 Oil field water supply	8 Air conditioning	11 Injection well
2 Irrigation	4 Industrial	7 Lawn and garden only	9 Dewatering	12 Other (Specify below)

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

Water Well Disinfected? Yes _____ No X

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)
7 Fiberglass			

CASING JOINTS: Glued _____ Clamped _____
 Welded _____ Threaded X

Blank casing diameter 2" in. to 73.5' ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.

Casing height above land surface 2.5' in. weight _____ lbs./ft. Wall thickness or gauge No. Sch. 40

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	11 Other (specify)
				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	
		7 Torch cut	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From 73.5' ft. to 83.5' ft. From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 71' ft. to 84' ft. From _____ ft. to _____ ft.

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

Grout Intervals: From 3' ft. to 71' 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	<u>Grain Elevators</u>

Direction from well? West How many feet? 20'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	22'	Clay - fill material	83	85	Shale - blue-gray
22'	37'	Clay - yellow-brown			
37'	48'	Clay - gray brown			
48'	59'	Clay - blue-gray			
59'	65'	Weathered Shale w/ shale lenses - blue-gray			
65'	76'	Shale - blue-gray			
76'	83'	Weathered Shale, shale w/ gypsum			

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) 1/9/96 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 1/9/96 under the business name of Geotechnical Services Inc. by (signature) _____

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.