

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

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Brown</u>	NW ¼ NW ¼ NE ¼	11	T 1 S	R 16 E/W

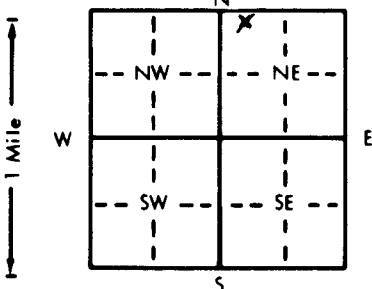
Distance and direction from nearest town or city street address of well if located within city?

1 1/2 miles West of Reserve, KS

2 WATER WELL OWNER: Gary Ramer
 RR#, St. Address, Box # : RFD 1
 City, State, ZIP Code : Falls City, NE 68355

Board of Agriculture, Division of Water Resources
 Application Number:

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



4 DEPTH OF COMPLETED WELL: 209 ft. **ELEVATION:** _____ ft.

Depth(s) Groundwater Encountered 1. 88.2 ft. 2. 184 ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL . . . 67 . . . ft. below land surface measured on mo/day/yr . . . 5-15-95

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

Est. Yield . . . 7 . . . gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter . . . 9 . . . in. to . . . 209 . . . ft., and . . . in. to . . . 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 |
| 2 Irrigation | 4 Industrial | 7 Lawn and garden only |
| | | 10 Monitoring well |
| | | 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 X No

5 TYPE OF BLANK CASING USED:

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

Blank casing diameter . . . 5 . . . in. to . . . 1.5-80 . . . ft., Dia . . . 5 . . . in. to . . . 90-180 . . . ft., Dia . . . in. to . . . ft.

Casing height above land surface . . . 18 . . . in., weight . . . 2,843 . . . lbs./ft. Wall thickness or gauge No. SDR . . . 21 . . .

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 . . . 180 . . . ft. to . . . 200 . . . ft., From . . . ft. to . . . ft.

From . . . 90 . . . ft. to . . . 80 . . . ft., From . . . ft. to . . . ft.

GRAVEL PACK INTERVALS: From . . . 31 . . . ft. to . . . 209 . . . 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 haleplug

Grout Intervals: From . . . 4 . . . 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 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 | none known |

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	CONT.	LOGGING INTERVALS
0	6	No Sample	90	120	siltstone - med. gray	
6	14	sandy clay - red. brn	120	140	siltstone interbedded sandstone	med. gray
14	23	sand & clay & gravel - brn	140	157	siltstone - med. gray	
23	25.5	shale - lt. gray	157	163	sandstone - gray	
25.5	27.5	shale - brn	163	167	limestone - brn	
27.5	38	shale - gray	167	171	shale	
38	39.5	limestone - lt. gray	171	173.5	limestone - gray	
39.5	41	shale - gray	173.5	174.5	shale - drk. gray	
41	45	shale - red	174.5	184	siltstone - med. gray	
45	48	shale - gray	184	187.5	limestone - lt. gray	
48	50	shale - med. gray	187.5	193	siltstone - bluish gray	
50	82	siltstone - med. gray	193	220	siltstone - med. gray	
82	88.2	siltstone interbedded sandstone				med. gray
88.2	89.5	sandstone - gray				
89.5	90	sandstone interbedded silt stone				

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) 5-15-95 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 308. This Water Well Record was completed on (mo/day/yr) 5-30-95 under the business name of Rieschick Drilling Company by (signature) Ray Rieschick

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.