|   |   | WELL RECORD F   | orm WWC-5        | KSA 82   | a-1212  |  |   |  |
|---|---|---|------------------|--|---|--|---|--|
| LOCATION OF WATER WELL:   | Fraction 1/4  | NE 1/4 NE   | Sect             | on Number  | Township Num  | ber<br>Zs  | Range Number  |  |
| Distance and direction from nearest to  |   | dress of well if located  | within city?     |  |   |  |   |  |
| WATER WELL OWNER:   | evendie   | ens   |                  |  | 67017   |  |   |  |
| RR#, St. Address, Box # :   | (N) Ma  | in Ben  | ton t            | San  | Board of Agr<br>Application N                                       |  | ision of Water Resources                            |  |
| LOCATE WELL'S LOCATION WITH<br>AN "X" IN SECTION BOX:   | DEPTH OF CO   | MPLETED WELL  | 85               | . ft. ELEV   | ATION:  |  |   |  |
| NW NE   | WELL'S STATIC  Pump Est. Yield  Bore Hole Diamet  WELL WATER TO  1 Domestic  2 Irrigation | test data: Well water gpm/ Well water erin. to D BE USED AS: 5 3 Feedlot 6 4 Industrial 7 | was              | low land su ft ft., supply ( er supply arden only partment? \)         | after   | no/day/yr hours pump hours pumpin. to 11 Inj 12 Ot | o/day/yr sample was sub-                            |  |
| S   | mitted  |   |                  | W  | ater Well Disinfected?  |  |   |  |
| TYPE OF BLANK CASING USED:  1 Steel 3 RMP (S  | SR)   | 5 Wrought iron<br>6 Asbestos-Cement   | ,                | specify belo   | w)  | Welded   | Clamped   |  |
| 2 PVC 4 ABS   |   | 7 Fiberglass  |                  |  | 6. 5:   |  | ed  |  |
| Blank casing diameter   |   |   |                  |  |   |  | to ft.  |  |
|   |   | in., weight   | PVC              | IDS  |   |  |   |  |
| YPE OF SCREEN OR PERFORATION MATERIAL:  1 Steel 3 Stainless steel :   |   | 5 Fiberglass  |                  |  |   | 10 Asbestos-cement 11 Other (specify)              |   |  |
| 2 Brass 4 Galvanized steel  |   | 6 Concrete tile 9 ABS   |                  |  | 12 None used (op  |  |   |  |
| SCREEN OR PERFORATION OPENINGS ARE:   |   |   | 5 Gauzed wrapped |  | 8) Saw cut 11 None (open hole)                                      |  | ·   |  |
|   | Mill slot   |   | rapped           |  | 9 Drilled holes   |  |   |  |
|   | Key punched   |   | out oc           |  |   |  |   |  |
| SCREEN-PERFORATED INTERVALS   | 44  | ? ft. to  | 85               | ft., Fro   | , , , , ,   |  |   |  |
|   | From  |   |                  |  |   |  |   |  |
| GRAVEL PACK INTERVALS   | 6: From   | ft. to  |                  | ft., Fro   | om  | ft. to.  |   |  |
| CROUT MATERIAL A NEW  | From  | ft. to  | (a)              | ft., Fro   |   |  | ft.   |  |
|   |   | Cement grout  | 3 Bentor         | iite 4   |   |  | ft. to ft.  |  |
|   |   |   | IL. I            |  |   |  |   |  |
| Vhat is the nearest source of possible contamination:  1 Septic tank  4 Lateral lines   |   | 7 Pit privy   |                  |  | stock pens  | 14 Abandoned water well 15 Oil well/Gas well       |   |  |
| 2 Sewer lines 5 Ces   |   | 8 Sewage lago   | n.               | 11 Fuel storage  |   | 16 Other (specify below)                           |   |  |
| 3 Watertight sewer lines 6 See  | •   | 9 Feedyard  | л                | <ul><li>12 Fertilizer storage</li><li>13 Insecticide storage</li></ul> |   | To Other (specify below)                           |   |  |
| Direction from well?  | page pit  | 3 i eedyaid   |                  |  | any feet? $\mathbf{Z} \mathcal{O} \mathcal{C}$                      | 7  |   |  |
| FROM TO   | LITHOLOGIC L  | OG  | FROM             | TO   |   | GGĮNG INT  | ERVALS  |  |
| 0 5 Soil  |   |   |                  |  |   |  |   |  |
| 5 25 CLay   |   |   |                  |  |   |  |   |  |
| 25 85 Shalet  | -Lime   |   |                  |  |   |  |   |  |
|   |   |   | 1                |  |   |  | <u> </u>  |  |
|   |   |   |                  |  |   |  |   |  |
|   |   |   |                  |  | ,   | ,  |   |  |
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|   |   |   |                  |  |   |  |   |  |
|   |   |   |                  |  |   |  |   |  |
| CONTRACTOR'S OR LANDOWNE  | FR'S CERTIFICATION  | )N: This water wall we  | (I) construc     | ted (2) rec  | onstructed or (3) plus  | aged under   | my jurisdiction and was                             |  |
| CONTRACTOR'S OR LANDOWNE  | ER'S CERTIFICATION  | DN: This water well was   | (1) construc     | ted, (2) rec   | onstructed, or (3) plu  | gged under   | my jurisdiction and was                             |  |
| CONTRACTOR'S OR LANDOWNED COMPLETE COMPLETE CONTRACTOR'S OR LANDOWNED COMPLETE CONTRACTOR'S License Now Lander the business name of | 1757  | This Water We   |                  | and this rec   | onstructed, or (3) plu<br>ord is true to the best<br>on (mo/day/s/) | gged under   | my jurisdiction and was<br>ledge and belief. Kansas |  |

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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.