

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

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|--|-----------------------------------|-----------------------------|----------------------------------|---|
| 1 LOCATION OF WATER WELL: County: SEDGWICK | Fraction SW ¼ SW ¼ SW ¼ | Section Number 32 | Township Number T 25 S | Range Number R 1 E EW |
|--|-----------------------------------|-----------------------------|----------------------------------|---|

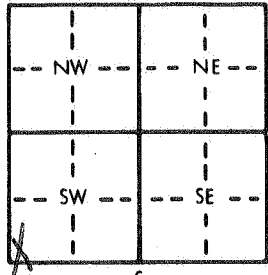
Distance and direction from nearest town or city street address of well if located within city?
7804 North Seneca Valley Center, Kansas

2 WATER WELL OWNER: **Tom Steinkirchner**
 RR#, St. Address, Box #: **7804 North Seneca**
 City, State, ZIP Code: **Valley Center, Kansas**
 Board of Agriculture, Division of Water Resources
 Application Number: _____

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

1 Mile

W



E

4 DEPTH OF COMPLETED WELL: **45** ft. ELEVATION: _____ ft.
 Depth(s) Groundwater Encountered 1. **13** ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL **13** ft. below land surface measured on mo/day/yr **6-25-87**
 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 **1.1** in. to _____ 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 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation 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 BLANK CASING USED:

| | | | | |
|---|-------------------------|--------------------------|-------------------------------|---|
| 1 Steel | 3 RMP (SR) | 6 Asbestos-Cement | 9 Other (specify below) | CASING JOINTS: Glued <u>X</u> Clamped _____ |
| 2 PVC | 4 ABS | 7 Fiberglass | <u>Cer-Mac styrene SDR-26</u> | Welded _____ |
| Blank casing diameter 5 in. to 35 in., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. | | | | Threaded _____ |
| Blank casing above land surface 12 in., weight _____ lbs./ft. Wall thickness or gauge No. 203 | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | 7 PVC | 10 Asbestos-cement |
| 1 Steel | 3 Stainless steel | 5 Fiberglass | 8 RMP (SR) | 11 Other (specify) _____ |
| 2 Brass | 4 Galvanized steel | 6 Concrete tile | <u>9 ABS</u> | 12 None used (open hole) |
| SCREEN OR PERFORATION OPENINGS ARE: | | | 8 Saw cut | 11 None (open hole) |
| 1 Continuous slot | 3 Mill slot | 5 Gauzed wrapped | <u>9 Drilled holes</u> | |
| 2 Louvered shutter | 4 Key punched 35 | 6 Wire wrapped | 10 Other (specify) _____ | |
| SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft. | | 7 Torch cut 45 | | |
| GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft. | | 10 Other (specify) _____ | | |
| | | 11 None (open hole) | | |

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From 4 ft. to 24 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? East How many feet? 100

| FROM | TO | LITHOLOGIC LOG | FROM | TO | LITHOLOGIC LOG |
|------|----|----------------|------|----|----------------|
| 0 | 3 | Topsoil | | | |
| 3 | 11 | Clay | | | |
| 11 | 33 | Fine Sand | | | |
| 33 | 45 | Medium Sand | | | |
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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) **6-25-87** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **236**. This Water Well Record was completed on (mo/day/yr) 9-11-87 under the business name of **Harp Well & Pump Service, Inc.** by (signature) *Mary Arnold*

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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.