

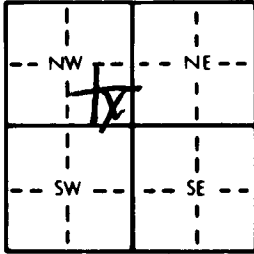
NE SW NE NW

WATER WELL RECORD

Form WWC-5

KSA 82a-1212

Plugging Report

1 LOCATION OF WATER WELL:		Fraction	Section Number		Township Number	Range Number
County: <u>Bellevue</u>		<u>3/4</u> <u>1/4</u> <u>NW</u> <u>1/4</u>	<u>32</u>		T <u>26</u> S	R <u>1</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>3641 mascot</u>						
2 WATER WELL OWNER: <u>Mr Heinemann</u>						
RR#, St. Address, Box #: <u>3641 mascot</u>						
City, State, ZIP Code: <u>White Ks 67204</u>						
Board of Agriculture, Division of Water Resources Application Number: <u>none</u>						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>30</u> ft. ELEVATION: <u>1300</u>				
		Depth(s) Groundwater Encountered 1. <u>19</u> ft. 2. _____ ft. 3. _____ ft.				
		WELL'S STATIC WATER LEVEL <u>19</u> ft. below land surface measured on mo/day/yr <u>7-8-97</u>				
		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 <u>4</u> in. to _____ ft. and _____ in. to _____ ft.				
		WELL WATER TO BE USED AS:				
		1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 11 Injection well				
		2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well 12 Other (Specify below)				
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr sample was submitted _____						
Water Well Disinfected? Yes _____ No <u>X</u>						
5 TYPE OF BLANK CASING USED:						
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____						
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____						
7 Fiberglass _____ Threaded <u>X</u>						
Blank casing diameter _____ in. to _____ ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.						
Casing height above land surface <u>0</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>1 1/4" Pipe</u>						
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 <u>Sand Point</u>						
7 Torch cut 10 Other (specify) _____						
SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.						
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.						
6 GROUT MATERIAL:						
1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____						
Grout Intervals: From <u>19</u> ft. to <u>0</u> 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? <u>West</u> How many feet? <u>10</u>						
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
<u>19</u>	<u>0</u>	<u>Cement Grout</u>				
<u>Pulled & Plugged</u>						
<u>Sand Point Well</u>						
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) <u>7-8-97</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>472</u> This Water Well Record was completed on (mo/day/yr) <u>7-8-97</u> under the business name of <u>Beardon Pump & Well Serv.</u> (signature) <u>David Beek</u>						
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.						

OFFICE USE ONLY

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EW

SEC.

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