

## WATER WELL RECORD

Form WWC-5

KSA 82a-1212

1 LOCATION OF WATER WELL:		Fraction County: Butler nw 1/4 nw 1/4 nw 1/4	Section Number 17	Township Number T 26 S	Range Number R 3e E/W	
Distance and direction from nearest town or city street address of well if located within city? One mile west of Benton, KS on K-254 *Monitor Well #4						
2 WATER WELL OWNER:		KDOT, Attn: Kevin Adams, Bureau of Design (See attached map) RR#, St. Address, Box # : Docking State Office Bldg. City, State, ZIP Code : Topeka, Kansas 66612				Board of Agriculture, Division of Water Resources Application Number: None
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL . . . 24' ft. ELEVATION: . . . . . na. Depth(s) Groundwater Encountered 1 . . . 16.3 . . . ft. 2 . . . . . ft. 3 . . . . . ft. WELL'S STATIC WATER LEVEL . . . 16.3 . . . ft. below land surface measured on mo/day/yr . . . 4/19/96. 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 . . . 3.5 . . . in. to . . . . . ft., and . . . . . in. to . . . . . ft. WELL WATER TO BE USED AS: 10 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 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes . . . . . No . . . . . X . . . . . If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes XX No				
5 TYPE OF BLANK CASING USED: 2		1 Steel 2 PVC	3 RMP (SR) 4 ABS	5 Wrought iron 6 Asbestos-Cement 7 Fiberglass	8 Concrete tile 9 Other (specify below)	CASING JOINTS: Glued . . . . . Clamped . . . . . Welded . . . . . Threaded . . . . .
Blank casing diameter . . . . . 2 . . . in. to . . . . . 14 . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.						
Casing height above land surface . . . . . 36 . . . in., weight . . . . . sched. . . . . 40 . . . lbs./ft. Wall thickness or gauge No. . . . .						
TYPE OF SCREEN OR PERFORATION MATERIAL: 7		1 Steel 2 Brass	3 Stainless steel 4 Galvanized steel	5 Fiberglass 6 Concrete tile	7 PVC 8 RMP (SR) 9 ABS	10 Asbestos-cement 11 Other (specify) . . . . . 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE: 3		1 Continuous slot 2 Louvered shutter	3 Mill slot 4 Key punched	5 Gauzed wrapped 6 Wire wrapped 7 Torch cut	8 Saw cut 9 Drilled holes 10 Other (specify) . . . . .	11 None (open hole)
SCREEN-PERFORATED INTERVALS:		From . . . . . 24 . . . ft. to . . . . . 14 . . . ft., From . . . . . ft. to . . . . . ft.				
GRAVEL PACK INTERVALS:		From . . . . . 24 . . . ft. to . . . . . 13 . . . ft., From . . . . . ft. to . . . . . ft.				
6 GROUT MATERIAL: 3		1 Neat cement 2 Cement grout	3 Bentonite	4 Other . . . . .	10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)	
Grout Intervals: From . . . . . 13 . . . ft. to . . . . . Surface . . . 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 2 Sewer lines 5 Cess pool 8 Sewage lagoon 3 Watertight sewer lines 6 Seepage pit 9 Feedyard						
Direction from well? How many feet? *See attached map						
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS
0	4	Topsoil		0	14	Bentonite
4	15	Clay		14	24	Chlorinated sand
15	WTD	Sandy, wet clay				
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) . . . . . 4/19/96. and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. . . . . This Water Well Record was completed on (mo/day/yr) . . . . . 5/31/96. under the business name of Kansas Dept. of Transportation						
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.						