

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

1 LOCATION OF WATER WELL:	Fraction County: <i>Butcher</i>	1/4 <i>SE 1/4 NE 1/4 NW 1/4</i>	Section Number Distance and direction from nearest town or city street address of well if located within city?	Township Number <i>15</i>	Range Number R 3 <i>EW</i>		
2 WATER WELL OWNER:	<i>Bill Reese</i>		<i>Wichita Kan</i>				
RR#, St. Address, Box # :	<i>1746 S Santa Fe</i>		Board of Agriculture, Division of Water Resources				
City, State, ZIP Code	<i>67211</i>		Application Number:				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF COMPLETED WELL <i>105</i> ft. ELEVATION: <i>40</i> Depth(s) Groundwater Encountered <i>1</i> ft. 2. <i>60</i> ft. 3. ft. WELL'S STATIC WATER LEVEL <i>40</i> ft. below land surface measured on mo/day/yr Pump test data: Well water was ft. after hours pumping gpm Est. Yield <i>1</i> gpm: Well water was ft. after hours pumping gpm Bore Hole Diameter <i>8 1/2</i> 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 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>				
5 TYPE OF BLANK CASING USED:	1 Steel <input checked="" type="checkbox"/>	3 RMP (SR) <input type="checkbox"/>	5 Wrought iron <input type="checkbox"/>	8 Concrete tile <input type="checkbox"/>	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped <input type="checkbox"/>		
	2 PVC <input checked="" type="checkbox"/>	4 ABS <input type="checkbox"/>	6 Asbestos-Cement <input type="checkbox"/>	9 Other (specify below) <input type="checkbox"/>	Welded <input type="checkbox"/>		
	Blank casing diameter <i>5</i> in. to ft.		Dia <i>16</i> in. to ft.	Dia <i>16</i> in. to ft.	Threaded <input type="checkbox"/>		
	Casing height above land surface <i>18</i> in.		weight <i>10</i> lbs./ft.	Wall thickness or gauge No. <i>12 1/4</i>	ft.		
TYPE OF SCREEN OR PERFORATION MATERIAL:	1 Steel <input type="checkbox"/>	3 Stainless steel <input type="checkbox"/>	5 Fiberglass <input type="checkbox"/>	8 RMP (SR) <input type="checkbox"/>	10 Asbestos-cement <input type="checkbox"/>		
	2 Brass <input type="checkbox"/>	4 Galvanized steel <input type="checkbox"/>	6 Concrete tile <input type="checkbox"/>	9 ABS <input type="checkbox"/>	11 Other (specify) <input type="checkbox"/>		
SCREEN OR PERFORATION OPENINGS ARE:	1 Continuous slot <input type="checkbox"/>	3 Mill slot <input type="checkbox"/>	5 Gauzed wrapped <input type="checkbox"/>	8 Saw cut <input type="checkbox"/>	11 None (open hole) <input type="checkbox"/>		
	2 Louvered shutter <input type="checkbox"/>	4 Key punched <input type="checkbox"/>	6 Wire wrapped <input type="checkbox"/>	9 Drilled holes <input type="checkbox"/>	12 None used (open hole) <input type="checkbox"/>		
SCREEN-PERFORATED INTERVALS:	From <i>40</i>	ft. to <i>105</i>	ft., From <i>105</i>	ft. to <i>105</i>	ft.		
GRAVEL PACK INTERVALS:	From <i>40</i>	ft. to <i>105</i>	ft., From <i>105</i>	ft. to <i>105</i>	ft.		
6 GROUT MATERIAL:	1 Neat cement <input checked="" type="checkbox"/>	2 Cement grout <input checked="" type="checkbox"/>	3 Bentonite <input type="checkbox"/>	4 Other <input type="checkbox"/>			
Grout Intervals:	From <i>0</i>	ft. to <i>20</i>	ft., From <i>20</i>	ft. to <i>40</i>	ft., From <i>40</i>		
What is the nearest source of possible contamination:	1 Septic tank <input type="checkbox"/>	4 Lateral lines <input type="checkbox"/>	7 Pit privy <input type="checkbox"/>	10 Livestock pens <input type="checkbox"/>	14 Abandoned water well <input type="checkbox"/>		
	2 Sewer lines <input type="checkbox"/>	5 Cess pool <input type="checkbox"/>	8 Sewage lagoon <input checked="" type="checkbox"/>	11 Fuel storage <input type="checkbox"/>	15 Oil well/Gas well <input type="checkbox"/>		
	3 Watertight sewer lines <input type="checkbox"/>	6 Seepage pit <input type="checkbox"/>	9 Feedyard <input type="checkbox"/>	12 Fertilizer storage <input type="checkbox"/>	16 Other (specify below) <input type="checkbox"/>		
Direction from well?	<i>S-W</i>		How many feet? <i>150</i>				
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS	
<i>0</i>	<i>6</i>	<i>Soil</i>					
<i>6</i>	<i>12</i>	<i>Silt</i>					
<i>12</i>	<i>13</i>	<i>Rock</i>					
<i>13</i>	<i>105</i>	<i>Shale & Limestone</i>					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:	This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) <i>6/15/91</i> and this record is true to the best of my knowledge and belief. Kansas						
Water Well Contractor's License No. <i>R-54</i>	This Water Well Record was completed on (mo/day/yr) <i>7/19/91</i> by (signature) <i>Charles Winter</i>						
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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.							