

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

1 LOCATION OF WATER WELL:		Fraction SW $\frac{1}{4}$ SW $\frac{1}{4}$ SW $\frac{1}{4}$	Section Number 24	Township Number T 26 S	Range Number R 4 E EW						
Distance and direction from nearest town or city street address of well if located within city? 1½ East of Santa Fe Lake Road, 1/8 North of 45th North Towanda, KS.											
2 WATER WELL OWNER:		Leon Trammel 1020 E. 19th St. Wichita, Kansas 67214				Board of Agriculture, Division of Water Resources Application Number:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:						4 DEPTH OF COMPLETED WELL ..... 75 ft. ELEVATION: ..... Depth(s) Groundwater Encountered 1. 37 ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL ..... 37 ft. below land surface measured on mo/day/yr ..... 9-21-87 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 ..... 11 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) 2 PVC 4 ABS	5 Wrought iron 8 Concrete tile 6 Asbestos-Cement 9 Other (specify below) 7 Fiberglass Cer-Mac styrene SDR-26	CASING JOINTS: Glued ..... X Clamped ..... Welded ..... Threaded .....							
Blank casing diameter		5 in. to 50 ft., Dia.	. in. to ..... ft., Dia ..... in. to ..... ft.								
Casing height above land surface		12 in., weight	1.59 lbs./ft. Wall thickness or gauge No. ..... 203								
TYPE OF SCREEN OR PERFORATION MATERIAL:						7 PVC 10 Asbestos-cement 8 RMP (SR) 11 Other (specify) 9 ABS 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:						5 Gauzed wrapped 8 Saw cut 11 None (open hole) 6 Wire wrapped 9 Drilled holes— 7 Torch cut 10 Other (specify)					
SCREEN-PERFORATED INTERVALS:		From ..... 50 ft. to ..... 75 ft., From ..... ft. to ..... ft.	From ..... ft. to ..... ft., From ..... ft. to ..... ft.								
GRAVEL PACK INTERVALS:		From ..... 24 ft. to ..... 75 ft., From ..... ft. to ..... ft.	From ..... ft. to ..... ft., From ..... ft. to ..... ft.								
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., From ..... ft. to ..... ft.											
What is the nearest source of possible contamination:						10 Livestock pens 14 Abandoned water well 11 Fuel storage 15 Oil well/Gas well 12 Fertilizer storage 16 Other (specify below) 13 Insecticide storage ..... None Apparent .....					
Direction from well?						How many feet?					
LITHOLOGIC LOG											
FROM	TO					FROM	TO	LITHOLOGIC LOG			
0	3	Topsoil									
3	11	Clay									
11	53	Brown Shale									
53	75	Gray Shale									
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) ..... 9-21-87						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) ..... 3-31-88					
under the business name of <u>Harp Well &amp; Pump Service, Inc.</u> by (signature) <u>Mary Arnold</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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.