

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

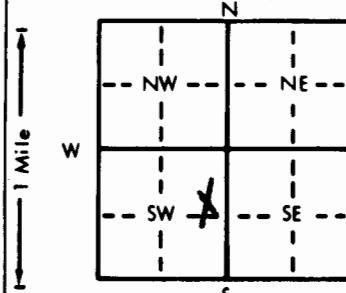
1 LOCATION OF WATER WELL:	Fraction County: BUTLER SE 1/4 NE 1/4 SW 1/4	Section Number 18	Township Number T 27 S	Range Number R 3 E EN
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Distance and direction from nearest town or city street address of well if located within city?

Observation Well #3 West edge of Andover, Kansas

2 WATER WELL OWNER:	Messener Enterprises RR#, St. Address, Box # : 450 North 159th East	Board of Agriculture, Division of Water Resources
City, State, ZIP Code :	Wichita, Kansas 67230	Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL.....100 ft. ELEVATION: .....
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Depth(s) Groundwater Encountered 1. 18' ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL ..... 18' ft. below land surface measured on mo/day/yr 3-24-86

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.....6. ....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. XX; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes XX No

5 TYPE OF BLANK CASING USED:	5 Wrought iron 1 Steel 3 RMP (SR)	8 Concrete tile 6 Asbestos-Cement	CASING JOINTS: Glued ... XX. Clamped .....
	2 PVC 4 ABS	7 Fiberglass	Welded..... Threaded.....

Blank casing diameter ..... 160 ..... in. 30 ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface ..... 18 ..... in., weight ..... 43 ..... lbs./ft. Wall thickness or gauge No. .... 091

TYPE OF SCREEN OR PERFORATION MATERIAL:	7 PVC 1 Steel 3 Stainless steel	10 Asbestos-cement 2 Brass 4 Galvanized steel
	5 Fiberglass 6 Concrete tile	8 RMP (SR) 160 9 ABS

SCREEN OR PERFORATION OPENINGS ARE:

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)
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SCREEN-PERFORATED INTERVALS: From ..... 30 ..... ft. to ..... 100 ..... ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From ..... 20 ..... ft. to ..... 100 ..... 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. 0 ..... ft. to ..... 20 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination:

1 Septic tank 2 Sewer lines 3 Watertight sewer lines	4 Lateral lines 5 Cess pool 6 Seepage pit	7 Pit privy 8 Sewage lagoon 9 Feedyard	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)
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Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	5	Topsoil and red clay	75	80	Blue shale
5	10	Red and tan clay	80	85	Blue shale
10	15	Tan clay and sandstone	85	90	Blue shale
15	20	Sandstone and tan clay	90	95	Blue and gray shale
20	25	Sandstone	95	100	Gray shale and limestone
25	30	Sandstone and gray clay			
30	35	tan and gray shale			
35	40	Gray shale			
40	45	Gray shale			
45	50	Gray shale and sandstone			
50	55	Blue Shale			
55	60	Blue shale			
60	65	Blue shale			
65	70	Blue shale			
70	75	Blue 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) .... 3-24-86 ..... 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/year) 5-16-86 ..... 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, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.