

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

1 LOCATION OF WATER WELL:		Fraction County: <b>Butler</b>	NW $\frac{1}{4}$ NW $\frac{1}{4}$ SE $\frac{1}{4}$	Section Number 20	Township Number T 27 S	Range Number R 3E E	
Distance and direction from nearest town or city street address of well if located within city?							
<b>#6 Yorktown, Andover, Ks. Bicentennial Addition</b>							
2 WATER WELL OWNER:		Sharp Construction 430 Walnut Augusta, Ks. 67010					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 ..... 105 ft. ELEVATION: ..... Depth(s) Groundwater Encountered 1 ..... ft. 2 ..... ft. 3 ..... ft. WELL'S STATIC WATER LEVEL ..... 35 ft. below land surface measured on mo/day/yr 10-2-90 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 ..... 105 ..... 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 ..... No ..... X ..... If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes <input checked="" type="checkbox"/> No					
5 TYPE OF BLANK CASING USED:		1 Steel 3 RMP (SR)	2 PVC 4 ABS	5 Wrought iron 6 Asbestos-Cement	7 PVC 8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped ..... Welded ..... Threaded .....	
Blank casing diameter		5 in. to 35		7 Fiberglass	9 Other (specify below) <b>SDR-26</b>		
Casing height above land surface		12 in., weight 2.29			lbs./ft. Wall thickness or gauge No. .214		
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel 3 Stainless steel		2 Brass 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:							
1 Continuous slot 3 Mill slot		2 Louvered shutter 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 ..... 35 ft. to ..... 105 ft.					From ..... ft. to ..... ft.		
GRAVEL PACK INTERVALS: From ..... 24 ft. to ..... 105 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:							
1 Septic tank 4 Lateral lines		2 Sewer lines 5 Cess pool	3 Watertight sewer lines 6 Seepage pit	7 Pit privy 8 Sewage lagoon	9 Feedyard	10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage None Apparent ..... How many feet?	
Direction from well?							
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS	
0 3	3 11	topsoil clay					
11 51	51 105	brown shale grey 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) 10-2-90 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) 1-10-91 under the business name of <b>Harp Well and Pump Service, Inc.</b> by (signature) <i>Mary Arnold</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.