

WATER WELL RECORD Form WWC-5 KSA 82a-1212				
1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number
County: <u>Butler</u>		<u>SE 1/4 SW 1/4 SW 1/4</u>	<u>22</u>	T <u>27</u> S
Distance and direction from nearest town or city street address of well if located within city?		Range Number <u>4</u> <u>EW</u>		
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources		
RR#, St. Address, Box # :		Application Number:		
City, State, ZIP Code :				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>22.5</u> ft. ELEVATION:		
		Depth(s) Groundwater Encountered 1. <u>17</u> ft. 2. <u>3</u> ft.		
		WELL'S STATIC WATER LEVEL <u>17.20</u> ft. below land surface measured on mo/day/yr <u>1-5-94</u>		
		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 <u>8</u> 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 <u>10 Monitoring well</u>		
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr sample was submitted _____		
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued _____ Clamped _____		
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile		Welded _____		
<u>2 PVC</u> 4 ABS 6 Asbestos-Cement 9 Other (specify below)		<u>Threaded</u> <u>Flush</u>		
7 Fiberglass				
Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.				
Casing height above land surface <u>Flush</u> in., weight <u>703</u> lbs./ft. Wall thickness or gauge No. <u>154</u>				
TYPE OF SCREEN OR PERFORATION MATERIAL:		10 Asbestos-cement		
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____		12 None used (open hole)		
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS				
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped 8 Saw cut 11 None (open hole)		
1 Continuous slot <u>3 Mill slot</u> 6 Wire wrapped 9 Drilled holes		10 Other (specify) _____		
2 Louvered shutter 4 Key punched 7 Torch cut				
SCREEN-PERFORATED INTERVALS: From <u>12.5</u> ft. to <u>22.5</u> ft., From _____ ft. to _____ ft.				
GRAVEL PACK INTERVALS: From <u>11.5</u> ft. to <u>22.5</u> ft., From _____ ft. to _____ ft.				
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other _____				
Grout Intervals: From <u>11.5</u> ft. to _____ ft., From _____ ft. to _____ ft.				
What is the nearest source of possible contamination:		10 Livestock pens 14 Abandoned water well		
1 Septic tank 4 Lateral lines 7 Pit privy <u>11 Fuel storage</u> 15 Oil well/Gas well		16 Other (specify below)		
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage				
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage				
Direction from well? <u>SW</u>		How many feet? <u>90</u>		
FROM	TO	LITHOLOGIC LOG	FROM	TO
0.0	11.5	clay, dark gray		
11.5	15.0	clay, light brown		
15.0	19.0	Silty Clay, sandy		
19.0	22.0	Sand		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>1-5-94</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>531</u> This Water Well Record was completed on (mo/day/yr) <u>1-7-94</u> under the business name of <u>GSI</u> by (signature) <u>Allison J. ...</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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.				