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

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: Sedgwick	NE ¼ SW ¼ SW ¼	34	T 28 S	R 2 (E) W

Distance and direction from nearest town or city? 3 ~~W~~E OF Derby

Street address of well if located within city?

2 WATER WELL OWNER: Wayne Williams

RR#, St. Address, Box # : 535 N Oliver

City, State, ZIP Code 67208

Board of Agriculture, Division of Water Resources Application Number:

3 DEPTH OF COMPLETED WELL 100 ft. Bore Hole Diameter 8 7/8 in. to 20 ft., and ..... in. to ..... ft.

Well Water to be used as: (1) Domestic 3 Feedlot 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Observation well 11 Injection well 12 Other (Specify below) 2 Irrigation 4 Industrial

Well's static water level 50 ft. below land surface measured on 11 month 7 day 80 year

Pump Test Data: Well water was ..... ft. after 1 hours pumping 10 gpm

Est. Yield 10 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

4 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile Casing Joints: Glued X Clamped

1 Steel (3) RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded

2 PVC 4 ABS 7 Fiberglass Threaded

Blank casing dia 5 in. to 100 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface 18 in., weight 200 lbs./ft. Wall thickness or gauge No .214

TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement

1 Steel 3 Stainless steel 5 Fiberglass (8) RMP (SR) 11 Other (specify)

2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)

Screen or Perforation Openings Are: 5 Gauzed wrapped (8) Saw cut 11 None (open hole)

1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes

2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)

Screen-Perforation Dia 5 in. to 75 ft., Dia ..... in. to ..... ft., Dia ..... in to ..... ft.

Screen-Perforated Intervals: From 55 ft. to 75 ft., From ..... ft. to ..... ft.

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

Gravel Pack Intervals None From ..... ft. to ..... ft., From ..... ft. to ..... ft.

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

5 GROUT MATERIAL: 1 Neat cement (2) Cement grout 3 Bentonite 4 Other

Grouted Intervals: From 10 ft. to 20 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination: Basement

1 Septic tank 4 Cess pool (7) Sewage lagoon 10 Fuel storage 14 Abandoned water well

2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well

3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)

13 Watertight sewer lines

Direction from well E How many feet 5,000 ? Water Well Disinfected? (Yes) No

Was a chemical/bacteriological sample submitted to Department? Yes (No): If yes, date sample was submitted ..... month ..... day ..... year: Pump Installed? Yes (No)

If Yes: Pump Manufacturer's name ..... Model No. ..... HP ..... Volts .....

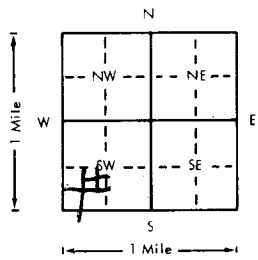
Depth of Pump Intake ..... ft. Pumps Capacity rated at ..... gal./min.

Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 11 month 7 day 80 year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 251

This Water Well Record was completed on 11 month 7 day 80 year under the business name of Winter Well Drilling by (signature) Charles Winter

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



ELEVATION:

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Soil			
3	10	Clay			
10	30	Rock			
30	50	Shale			
50	85	Lime			
85	100	Shale			

Depth(s) Groundwater Encountered 1. 70 ft. 2. ..... ft. 3. ..... ft. 4. ..... ft. (Use a second sheet if needed)

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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and

OFFICE USE ONLY T 28 R 2 (E) W SEC. 34 NE ¼ SW ¼ SW ¼