

WATER WELL RECORD						Form WWC-5		KSA 82a-1212		
1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number					
County: <u>Batler</u>		<u>SE 1/4 SW 1/4 SW 1/4</u>	<u>9</u>	<u>T 28 S</u>	<u>R 5 E</u>					
Distance and direction from nearest town or city street address of well if located within city? <u>5 Mile east 4 Mile south of Augusta</u>										
2 WATER WELL OWNER:						Board of Agriculture, Division of Water Resources				
RR#, St. Address, Box # : <u>Allen Foster Wichita Kan</u>						Application Number:				
City, State, ZIP Code <u>4549 Ceder Dale 67216</u>										
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF COMPLETED WELL: <u>145</u> ft. ELEVATION: _____ ft.							
			Depth(s) Groundwater Encountered <u>145</u> ft. 2. _____ ft. 3. _____ ft.							
			WELL'S STATIC WATER LEVEL <u>40</u> ft. below land surface measured on mo/day/yr _____							
			Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm							
			Est. Yield <u>50</u> gpm Well water was _____ ft. after _____ hours pumping _____ gpm							
			Bore Hole Diameter <u>8 1/2</u> in. to _____ ft., and _____ in. to _____ ft.							
			WELL WATER TO BE USED AS: 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 <u>X</u> ; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes <u>X</u> No _____							
5 TYPE OF BLANK CASING USED:										
1 Steel			3 RMP (SR)			5 Wrought iron		8 Concrete tile		CASING JOINTS: Glued <u>X</u> Clamped _____
2 PVC			4 ABS			6 Asbestos-Cement		9 Other (specify below)		Welded _____
						7 Fiberglass				Threaded _____
Blank casing diameter <u>5</u> in. to <u>60</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.										
Casing height above land surface <u>18</u> in., weight <u>200</u> lbs./ft. Wall thickness or gauge No. <u>214</u>										
TYPE OF SCREEN OR PERFORATION MATERIAL:										
1 Steel			3 Stainless steel			5 Fiberglass		7 PVC		10 Asbestos-cement
2 Brass			4 Galvanized steel			6 Concrete tile		8 RMP (SR)		11 Other (specify) _____
								9 ABS		12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:										
1 Continuous slot			3 Mill slot			5 Gauzed wrapped		8 Saw cut		11 None (open hole)
2 Louvered shutter			4 Key punched			6 Wire wrapped		9 Drilled holes		
						7 Torch cut		10 Other (specify) _____		
SCREEN-PERFORATED INTERVALS: From <u>50</u> ft. to <u>145</u> ft., From _____ ft. to _____ ft.										
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.										
6 GROUT MATERIAL:										
1 Neat cement			2 Cement grout			3 Bentonite		4 Other _____		
Grout Intervals: From <u>0</u> ft. to <u>120</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.										
What is the nearest source of possible contamination:										
1 Septic tank			4 Lateral lines			7 Pit privy		10 Livestock pens		14 Abandoned water well
2 Sewer lines			5 Cess pool			8 Sewage lagoon		11 Fuel storage		15 Oil well/Gas well
3 Watertight sewer lines			6 Seepage pit			9 Feedyard		12 Fertilizer storage		16 Other (specify below)
								13 Insecticide storage		
Direction from well? <u>N</u>			How many feet? <u>110</u>							
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG					
<u>0</u>	<u>4</u>	<u>SOIL</u>								
<u>4</u>	<u>12</u>	<u>SAND</u>								
<u>12</u>	<u>35</u>	<u>SHALE</u>								
<u>35</u>	<u>70</u>	<u>LIME</u>								
<u>70</u>	<u>145</u>	<u>SHALE</u>								
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) <u>3/26/87</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>257</u> This Water-Well Record was completed on (mo/day/yr) <u>3/20/87</u> under the business name of <u>Winter Well Drill</u> by (signature) <u>Charles Winter</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.										