WATER WELL RECORD   Form WWC-5   KSA 82a-1212   ID No. _____

1 | LOCATION OF WATER WELL:

| County: **Pottawatomie** | Fraction **NW** ¼ **SW** ¼ **SE** ¼ | Section Number **26** | Township Number T **9** S | Range Number R **10** (E)W |

Distance and direction from nearest town or city street address of well if located within city?

2 | WATER WELL OWNER: **Bill Boyce**

RR#, St. Address, Box # : **18820 Military Camp Rd**

City, State, ZIP Code : **Wamego, KS 66547-9408**

Board of Agriculture, Division of Water Resources

Application Number: **8294 & 45511**

3 | LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:

```
           N
   +-----+-----+
   | NW  | NE  |
 W +-----+-----+ E
   | SW  | SE  |
   |  X  |     |
   +-----+-----+
           S
```
1 Mile

4 | DEPTH OF COMPLETED WELL   **81** ft. ELEVATION: _____

Depth(s) Groundwater Encountered   1 __**1**__ ft. 2 _____ ft. 3 _____ ft.

WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr _____

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 **28** in. to **81** ft. and _____ in. to _____ ft.

WELL WATER TO BE USED AS: 5 Public water supply   8 Air conditioning   11 Injection well
1 Domestic   3 Feed lot   6 Oil field water supply   9 Dewatering   12 Other (Specify below)
2 Irrigation   4 Industrial   7 Lawn and garden (domestic)   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 _____ No **X**

5 | TYPE OF BLANK CASING USED:

1 Steel   3 RMP (SR)   5 Wrought Iron   8 Concrete tile   CASING JOINTS: Glued **X** Clamped _____
2 PVC   4 ABS   6 Asbestos-Cement   9 Other (specify below)   Welded _____
    7 Fiberglass   Threaded _____

Blank casing diameter **16** in. to **41** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface **24** in., weight **16.15** lbs./ft. Wall thickness or gauge No. **.500**

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: 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-PERFORATED INTERVALS: From **41** ft. to **81** ft. From _____ ft. to _____ ft.
    From _____ ft. to _____ ft. From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From **20** ft. to **81** 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   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   **NONE**

Direction from well? _____   How many feet? _____

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3		Surface			
3	15		Loess			
15	36		Soft Clay			
36	38		Fine to Medium Sand w/ Clay Strks			
38	40		Medium Sand			
40	50		River Mud			
50	81		Medium Sand & Gravel & Rocks			

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/yr) **12-16-05** and this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's License No. **554**   This Water Well Record was completed on (mo/day/yr) **12-27-05**

under the business name of **Woofter Pump & Well Inc.**   by (signature) _Jay C. Woofter_

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

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