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

1 LOCATION OF WATER WELL

	Fraction	NE		SE			Section Number	Township Number	Range Number
County: Jefferson	SW ¼	SW ¼	NE ¼				6	T 9 (S)	R 19 (E)W

Distance and direction from nearest town or city? **in Dunavant**   Street address of well if located within city?

2 WATER WELL OWNER: Don Heineken

RR#, St. Address, Box # : RR 2

City, State, ZIP Code : Valley Falls, Kansas 66088

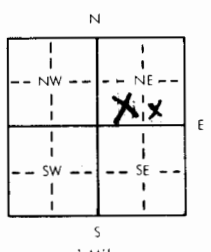Board of Agriculture, Division of Water Resources

Application Number:

3 DEPTH OF COMPLETED WELL ....90.... ft. Bore Hole Diameter ...12.... in. to .... ft., and .... in. to .... ft.

Well Water to be used as:

1 Domestic	3 Feedlot	5 Public water supply
2 Irrigation	4 Industrial	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)

Well's static water level ......70..... ft. below land surface measured on ...October...... month ....22.... day ..1980..... year

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

Est. Yield **15** gpm: Well water was.......... ft. after .... hours pumping ....gpm

4 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron
2 PVC	4 ABS	6 Asbestos-Cement
		7 Fiberglass

8 Concrete tile
9 Other (specify below)

Casing Joints: Glued ✓ Clamped
Welded ....
Threaded ....

Blank casing dia ....**5** in. to **0-88** ft., Dia .... in. to .... ft., Dia .... in. to .... ft.

Casing height above land surface..........**24** in., weight .... **2.36** 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
2 Brass	4 Galvanized steel	6 Concrete tile

8 RMP (SR)
9 ABS

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

9 Drilled holes
10 Other (specify) ....

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

Screen-Perforated Intervals: From.....**78**.... ft. to ...**88**.... ft., From.......... ft. to .... ft.

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

Gravel Pack Intervals: From.....**15**.... ft. to ...**90**.... 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..........**5**.... ft. to ...**15**.... ft., From.......... ft. to .... ft., From.......... ft. to .... ft.

What is the nearest source of possible contamination: 10 Fuel storage   14 Abandoned water well

1 Septic tank	4 Cess pool	7 Sewage lagoon	11 Fertilizer storage
2 Sewer lines	5 Seepage pit	8 Feed yard	12 Insecticide storage
3 Lateral lines	6 Pit privy	9 Livestock pens	13 Watertight sewer lines

15 Oil well/Gas well
16 Other (specify below)
....

Direction from well..........**NE**.......... How many feet ..**110**....? 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 .October.......... month ..22.... day ...1980.... year

and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **182**

This Water Well Record was completed on.October.......... month. **28** day 1980.......... year under the business

name of **Strader Drlg. Co. Inc.** by (signature) **Dale Aakren**

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

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	4	Top Soil			
4	75	Clay, brown, blue			
75	88	Fine Sand			
88	90	Shale, grey			

ELEVATION: **1160 RM**

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 retain one for your records.