

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

1 LOCATION OF WATER WELL: County: OTTAWA	Fraction NE 1/4 NE 1/4 SE 1/4	Section Number 34	Township Number T 12 S	Range Number R 3W EW
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Distance and direction from nearest town or city street address of well if located within city?
1/2 MILE EAST OF 81 HWY. 1/2 MILE NORTH OF OTTAWA RD. OTTAWA COUNTY PERMIT # 99-226

2 WATER WELL OWNER: TIM LINDFORS
 RR#, St. Address, Box # : **501 W. OTTAWA COUNTY RD.** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : **SALINA, KS. 67401** Application Number:

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

4 DEPTH OF COMPLETED WELL: 76.5 ft. ELEVATION:

Depth(s) Groundwater Encountered 1. **61** ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL **58** ft. below land surface measured on mo/day/yr

Pump test data: Well water was **64** ft. after **1** hours pumping **13** gpm
 Est. Yield **15 to 18** gpm: Well water was ft. after hours pumping gpm

Bore Hole Diameter **9** in. to **77** 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
2 Irrigation	4 Industrial	7 Lawn and garden only
		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 **X** No

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
2 PVC	4 ABS	7 Fiberglass	

Blank casing diameter **5** in. to **64** ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface **16** in., weight **160** lbs./ft. Wall thickness or gauge No. **SDR 26**

TYPE OF SCREEN OR PERFORATION MATERIAL:

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:

1 Continuous slot	3 Mill slot .025	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	

SCREEN-PERFORATED INTERVALS: From **64** ft. to **76.5** ft., From ft. to ft.

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

GRAVEL PACK INTERVALS: From **55** ft. to **76.5** 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 **5** ft. to **28** ft., From **52** ft. to **55** 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 **OPEN PASTURE NONE APPARENT**

Direction from well?		LITHOLOGIC LOG		PLUGGING INTERVALS	
FROM	TO	FROM	TO	FROM	TO
0	2				
		TOP SOIL BROWN			
2	6	CLAY RED SOFT			
6	11	CLAY WHITE SOFT			
11	13	CLAY RED SOFT			
13	18	CLAY GOLDEN RED			
18	23	CLAY WHITE SOFT			
23	25	CLAY GRAY SOFT			
25	28	SHALE GREEN			
28	35	CLAY GOLDEN SOFT			
35	61	CLAY GRAY SOFT			
61	73	SANDSTONE TAN FINE GRAIN			
73	77	CLAY GRAY			

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) **11-26-99** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **388** This Water Well Record was completed on (mo/day/yr) **11-30-99** under the business name of **PESTINGER PUMP SERVICE** by (signature) *[Signature]*

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.

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