

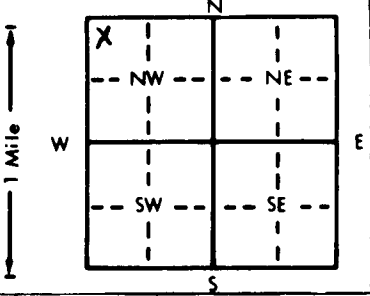
WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: ELLIS	Fraction NW 1/4 NW 1/4 NW 1/4	Section Number 31	Township Number T 13 S	Range Number R 18 E/W
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Distance and direction from nearest town or city street address of well if located within city?
1405 3rd St - Prairie Acres

2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :	SCHUMACHER CONSTRUCTION 2706 THUNDERBIRD DR HAYS KS 67601	Board of Agriculture, Division of Water Resources Application Number:
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL: 56 ft.	ELEVATION:
Depth(s) Groundwater Encountered 1. 38 ft. 2. ft. 3. ft.	
WELL'S STATIC WATER LEVEL . . . 38 . . . ft. below land surface measured on mo/day/yr . . . 11-7-01 . . .	
Pump test data: Well water was . . . ft. after . . . hours pumping . . . gpm	
Est. Yield . . . 30 . . . gpm: Well water was . . . ft. after . . . hours pumping . . . gpm	
Bore Hole Diameter . . . 10 . . . in. to . . . 56 . . . 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	9 Dewatering
12 Other (Specify below)	
2 Irrigation	4 Industrial
X2 Lawn and garden only	10 Monitoring well
Was a chemical/bacteriological sample submitted to Department? Yes. . . . No. . . . XX . . . ; If yes, mo/day/yr sample was submitted	
Water Well Disinfected? Yes No XX	

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued .XX. . . Clamped
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
X2 PVC	4 ABS	7 Fiberglass	Welded
Blank casing diameter . . . 5 . . . in. to . . . 36 . . . ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft.			Threaded
Casing height above land surface . . . 18 . . . in., weight . . . 160 . . . lbs./ft. Wall thickness or gauge No. . . .			
TYPE OF SCREEN OR PERFORATION MATERIAL:			
1 Steel	3 Stainless steel	5 Fiberglass	X2 PVC
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS
8 RMP (SR)	10 Asbestos-cement	11 Other (specify)	12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:			
1 Continuous slot	X2 Mill slot	5 Gauzed wrapped	8 Saw cut
2 Louvered shutter	4 Key punched	6 Wire wrapped	11 None (open hole)
7 Torch cut	10 Other (specify)	9 Drilled holes	
SCREEN-PERFORATED INTERVALS: From . . . 36 . . . ft. to . . . 56 . . . ft., From . . . ft. to . . . ft.			
GRAVEL PACK INTERVALS: From . . . 30 . . . ft. to . . . 56 . . . ft., From . . . ft. to . . . ft.			

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	X3 Bentonite	4 Other
Grout Intervals: From . . . 0 . . . ft. to . . . 30 . . . 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)
Direction from well?			How many feet?	

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	SURFACE CLAY			
10	30	HARD YELLOW CLAY			
30	40	FINE SAND			
40	50	MED SAND			
50	54	SOAPSTONE			
54	56	BLUE SHALE			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was X constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) . . . 11-7-01 . . . and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. . . . 444 . . . This Water Well Record was completed on (mo/day/yr) . . . 11-7-01 . . . under the business name of . . . ANDY ANDERSON DRILLING . . . by (signature) . . . Andy Anderson
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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.

OFFICE USE ONLY
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