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

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: **Wallace**	**NE** ¼ **NE** ¼ **NE** ¼	**34**	T **13** S	R **40** W

Distance and direction from nearest town or city street address of well if located within city?
South Hwy 27, Sharon Springs, KS

2 WATER WELL OWNER: **Mr. Jerry Eide**
RR#, St. Address, Box # : **PO Box 280**
City, State, ZIP Code : **Sharon Springs, KS 67758**

Board of Agriculture, Division of Water Resources
Application Number:

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

N / NW / NE / X / W / E / SW / SE / S / 1 Mile

4 DEPTH OF COMPLETED WELL **30** ft. ELEVATION:
Depth(s) Groundwater Encountered 1.5 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 **6.5** In. to **30** 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] **MW-22**
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
2 [PVC] 4 ABS 6 Asbestos-Cement 9 Other (specify below) 7 Fiberglass
CASING JOINTS: Glued Clamped Welded [Threaded] **X**
Blank casing diameter **2** in. to **10** Ft., Dia in. to ft., Dia in. to ft.
Casing height above land surface **FLUSH** In., weight **SCH 40** Lbs./ft. Wall thickness or gauge No.
TYPE OF SCREEN OR PERFORATION MATERIAL:
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 7 [PVC] 10 Asbestos-cement
2 Brass 4 Galvanized steel 6 Concrete tile 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 9 Drilled holes
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)
SCREEN-PERFORATED INTERVALS: From **10** ft. to **30** ft. From ft. to ft.
From ft. to ft. From ft. to Ft.
SAND PACK INTERVALS: From **8** ft. to **30** 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 From2 **0.5** ft. to **6** Ft. From3 **6** Ft. to **8** 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 **Contaminated Site**
Direction from well? How many feet?

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.5		Gravel			
0.5	4		Silt			
4	25		Clay			
25	30		Sand			
30	TD		End of Borehole			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w
Completed on (mo/day/yr) **08/12/14** And this record is true to the best of my knowledge and belief. Kansas
Water Well Contractor's License No. **585** This Water Well Record was completed on (mo/day/yr) **09/23/14**
under the business name of **Associated Environmental, Inc.** By (signature) **Bradley J. Johnson**

INSTRUCTIONS:. Please fill in blanks and circle the correct answers. Send 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 T R SEC