

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

1 LOCATION OF WATER WELL: County: <u>Ellis</u>	Fraction <u>SW</u> 1/4 <u>SW</u> 1/4 <u>SW</u> 1/4	Section Number <u>2</u>	Township Number T <u>14</u> S	Range Number R <u>18</u> <u>EW</u>
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Distance and direction from nearest town or city street address of well if located within city?
East Hwy 40, Hays, KS. 67601

2 WATER WELL OWNER: Mel Karst
 RR#, St. Address, Box #: East Hwy 40
 City, State, ZIP Code: Hays, Ks. 67601
 Board of Agriculture, Division of Water Resources
 Application Number:

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

4 DEPTH OF COMPLETED WELL: 35' ft. ELEVATION: _____ ft.
 Depth(s) Groundwater Encountered 1. 25' ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 21.59' ft. below land surface measured on mo/day/yr 3-6-97
 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 8 1/2" in. to 35' 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 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 _____ No NO

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing diameter 2.375 in. to 20' ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface Flush Ht. in., weight _____ lbs./ft. Wall thickness or gauge No. _____ SCH. 40
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 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:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From 35' ft. to 20' ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 35' ft. to 18' 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 18' ft. to 4' ft., From 4' ft. to 0' ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Lateral lines 7 Pit privy 1 Fuel storage FARMER 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage
 Direction from well? West How many feet? 150'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1.15	ls. rx sand/gravel road pack			
1.15	4	dk.brn-md.brn clay fill, firm, no odor or plasticity, dry			
4	15.15	lt.-md brn clay w/ trace amt. of caliche, dry, firm, no odor			
15.15	21.15	med.-lt. brn. silty clay w/ trace amt. of caliche, low plasticity, no odor, moist.			
21.15	34	lt. brn. tan clay, caliche through out, wet at 25, no odor, highly plastic. Wet at 25'			
34	35	Dk gray clay, mottled, faint odor, wet, some sand & gravel.			

Flush mts OK'd by Don Taylor

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) 2-26-97 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 539 This Water Well Record was completed on (mo/day/yr) 3-24-97 under the business name of JB Environmental Drilling by (signature) James Baker

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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