

WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.

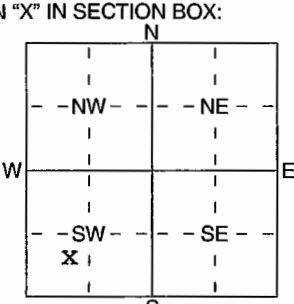
1 LOCATION OF WATER WELL: County: NESS	Fraction NE 1/4 SW 1/4 SW 1/4	Section Number 16	Township Number T 17 S	Range Number R 24 EW
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Distance and direction from nearest town or city street address of well if located within city?

3 miles West and 5 miles South of RANSOM KS

2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :	CARL KEILMAN RR 1 BOX 151 NESS CITY KS 67560	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 30 ft. ELEVATION:
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Depth(s) Groundwater Encountered 1**22**..... ft. 2 ft. 3 ft.
 WELL'S STATIC WATER LEVEL**22**..... ft. below land surface measured on **mo/day/yr****11-11-03**.....
 Pump test data: Well water was ft. after hours pumping gpm
 Est. Yield**4**..... gpm: Well water was ft. after hours pumping gpm
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 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)	9 Other (specify below)	Welded
<input checked="" type="checkbox"/> PVC	4 ABS	7 Fiberglass	Threaded

Blank casing diameter**5**..... in. to**22**..... ft., Dia in. to ft., Dia in. to ft.
 Casing height above land surface**1.8**..... in., weight**1.60**..... lbs./ft. Wall thickness or gauge No.

TYPE OF SCREEN OR PERFORATION MATERIAL:	<input checked="" type="checkbox"/> PVC	10 Asbestos-Cement
1 Steel	3 Stainless Steel	8 RMP (SR)
2 Brass	4 Galvanized Steel	9 ABS
	5 Fiberglass	11 Other (Specify)
	6 Concrete tile	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
1 Continuous slot	<input checked="" type="checkbox"/> Mill slot	6 Wire wrapped	9 Drilled holes
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify)

SCREEN-PERFORATED INTERVALS: From**22**..... ft. to**30**..... ft., From ft. to ft.
 GRAVEL PACK INTERVALS: From**22**..... 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	<input checked="" type="checkbox"/> Bentonite	4 Other
Grout Intervals: From 0 ft. to 22 ft., From ft. to ft., From ft. to ft.				

What is the nearest source of possible contamination:	10 Livestock pens	14 Abandoned water well
1 Septic tank	4 Lateral lines	7 Pit privy
2 Sewer lines	5 Cess pool	8 Sewage lagoon
3 Watertight sewer lines	6 Seepage pit	9 Feedyard
		11 Fuel storage
		12 Fertilizer storage
		13 Insecticide storage
		15 Oil well/Gas well
		16 Other (specify below)

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	SURFACE CLAY			
5	20	yellow clay			
20	28	SAND & CLAY			
28	30	BLUE SHALE			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was () constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year)**11-11-03**..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No**444**..... This Water Well Record was completed on (mo/day/yr)**11-11-03**..... under the business name of **ANDY ANDERSON DRILLING** by (signature) *Andy Anderson*

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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.