

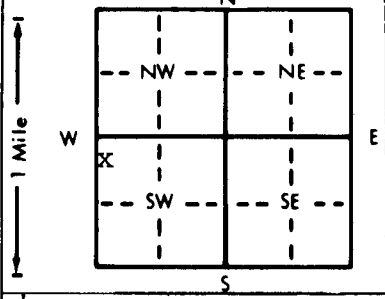
WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Greeley</u>	NW ¼ NW ¼ SW ¼	34	T 17 S	R 39 EW

Distance and direction from nearest town or city street address of well if located within city?
4 west 4 1/4 north of Selkirk

2 WATER WELL OWNER: Edward Mai
 RR#, St. Address, Box # : Tribune, Kansas 67879
 City, State, ZIP Code : _____
 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: 130 ft. **ELEVATION:** _____ ft.
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 9.8 ft. below land surface measured on mo/day/yr 9-19-95
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield _____ gpm: Well water was not tested _____ hours pumping _____ gpm
 Bore Hole Diameter 8 in. to 130 ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
 1 Domestic _____ 3 Feedlot _____ 6 Oil field water supply _____ 9 Dewatering _____ 11 Injection well _____
 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 sub-
 mitted _____ Water Well Disinfected? Yes X _____ No _____

5 TYPE OF BLANK CASING USED:
 1 Steel _____ 3 RMP (SR) _____ 5 Wrought iron _____ 8 Concrete tile _____ CASING JOINTS: Glued X _____ Clamped _____
 2 PVC _____ 4 ABS _____ 6 Asbestos-Cement _____ 9 Other (specify below) _____ Welded _____
 7 Fiberglass _____ Threaded _____

Blank casing diameter 5 in. to 110 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 18 in., weight 2.6 lbs./ft. Wall thickness or gauge No. 1/4"

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel _____ 3 Stainless steel _____ 5 Fiberglass _____ 7 PVC _____ 10 Asbestos-cement _____
 2 Brass _____ 4 Galvanized steel _____ 6 Concrete tile _____ 8 RMP (SR) _____ 11 Other (specify) _____
 9 ABS _____ 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 110 ft. to 130 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From 18 ft. to 130 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 4 ft. to 18 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) _____
 13 Insecticide storage _____

Direction from well? west How many feet? 10

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	13	top soil			
13	45	sand rock and sandy clay strips			
45	76	sandy clay			
76	84	sand rock and clay strips			
84	91	sand rock hard			
91	109	sand rock and sand strips			
109	124	clay			
124	130	oker and shale			

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) 9-19-95 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 139. This Water Well Record was completed on (mo/day/yr) 9-23-95 under the business name of Bartell Drilling by (signature) Joyce Bartell

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.