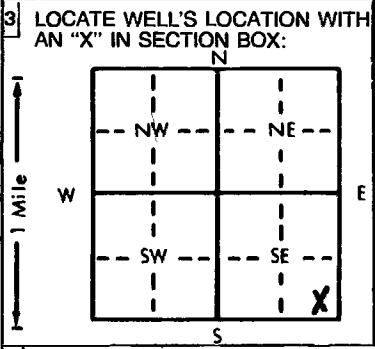


**WATER WELL RECORD Form WWC-5 KSA 82a-1212**

<b>1 LOCATION OF WATER WELL:</b> County: <u>NESS</u>	Fraction <u>SE 1/4 SE 1/4 SE 1/4</u>	Section Number <u>22</u>	Township Number <u>T 18 S</u>	Range Number <u>R 23 E/W</u>
---	--------------------------------------	--------------------------	-------------------------------	------------------------------

Distance and direction from nearest town or city street address of well if located within city?  
1 miles North and 3 miles West of NESS CITY KS

**2 WATER WELL OWNER:** RAY L MEIS  
 RR#, St. Address, Box # : PO BOX 273 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : NESS CITY KS 67560 Application Number: \_\_\_\_\_



**4 DEPTH OF COMPLETED WELL:** 62 ft. ELEVATION: \_\_\_\_\_  
 Depth(s) Groundwater Encountered 1 38 45 ft. 2. \_\_\_\_\_ ft. 3. \_\_\_\_\_ ft.  
 WELL'S STATIC WATER LEVEL 38 ft. below land surface measured on mo/day/yr 6-2-99  
 Pump test data: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Est. Yield 80 gpm; Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Bore Hole Diameter 10 in. to 62 ft., and \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 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 Lawn and garden only 10 Monitoring well \_\_\_\_\_  
 Was a chemical/bacteriological sample submitted to Department? Yes \_\_\_\_\_ No ; If yes, mo/day/yr sample was submitted \_\_\_\_\_  
 Water Well Disinfected? Yes \_\_\_\_\_ No

**5 TYPE OF BLANK CASING USED:**

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____
<input checked="" type="checkbox"/> PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
Blank casing diameter <u>5</u> in. to <u>42</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.	7 Fiberglass			Threaded _____
Casing height above land surface <u>18</u> in., weight <u>160</u> lbs./ft. Wall thickness or gauge No. _____				

**TYPE OF SCREEN OR PERFORATION MATERIAL:**  PVC 10 Asbestos-cement

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	11 Other (specify) _____
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	12 None used (open hole)

**SCREEN OR PERFORATION OPENINGS ARE:**

1 Continuous slot	<input checked="" type="checkbox"/> 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 42 ft. to 62 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**GRAVEL PACK INTERVALS:** From 3.5 ft. to 62 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**6 GROUT MATERIAL:** 1 Neat cement 2 Cement grout  Bentonite 4 Other \_\_\_\_\_  
 Grout Intervals: From 0 ft. to 25 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? \_\_\_\_\_ How many feet? \_\_\_\_\_

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	SURFACE CLAY			
10	20	YELLOW CLAY			
20	30	FINE SAND			
30	45	HARD YELLOW CLAY			
45	50	MED SAND			
50	60	LARGE SAND			
60	62	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) 6-2-99 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) 6-2-99 under the business name of ANDY ANDERSON DRILLING by (signature) Cindy 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, 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  
EW  
SEC.  
1/4  
1/4  
1/4