

Gmw-608

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

1 LOCATION OF WATER WELL: County: McPherson	Fraction NE 1/4 NE 1/4 NW 1/4	Section Number 22	Township Number T 18	Range Number R 3
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Distance and direction from nearest town or city street address of well if located within city?
7 Miles North of McPherson

2 WATER WELL OWNER: **Jay & Sarah Bremeyer**
 RR#, St. Address, Box #: **1500 Pueblo Road**
 City, State, ZIP Code: **McPherson, KS 67640**

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: **58** ft. ELEVATION: _____ ft.
 Depth(s) Groundwater Encountered 1. **49** ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL **37.3** ft. below land surface measured on mo/day/yr **11/10/97**
 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 **6** in. to **70** in. to _____ in. to _____ in.
 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 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 _____ Clamped _____
<input checked="" type="radio"/> 2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
Blank casing diameter 2 in. to 43 ft., Dia _____ in. to _____ ft.	7 Fiberglass			<input checked="" type="radio"/> Threaded
Casing height above land surface -5 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) _____
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	<input checked="" type="radio"/> 10 Other (specify) Factory Cut	

SCREEN-PERFORATED INTERVALS: From **58** ft. to **43** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **70** ft. to **41** 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 **41** ft. to **38** ft. From **38** 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 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 **See Attachment**

Direction from well?			How many feet?		
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Topsoil			
1	70	Br. Tight Clay			

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) **10/27/97** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **542** This Water Well Record was completed on (mo/day/yr) **11/24/97** under the business name of **T.D. Drilling Inc.** by (signature) *[Signature]*

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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