

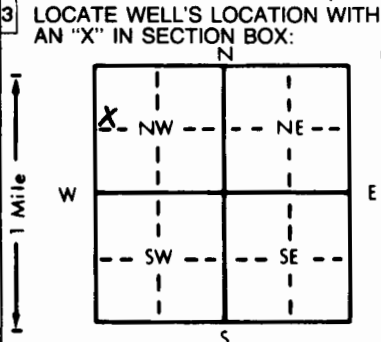
**WATER WELL RECORD Form WWC-5 KSA 82a-1212**

|  |   |                             |                                  |                              |
|--|---|-----------------------------|----------------------------------|------------------------------|
| 1 LOCATION OF WATER WELL:<br>County: <u>Rice</u> | Fraction<br><u>SW 1/4 NW 1/4 NW 1/4</u> | Section Number<br><u>15</u> | Township Number<br><u>T 19 S</u> | Range Number<br><u>R 8 E</u> |
|--|---|-----------------------------|----------------------------------|------------------------------|

Distance and direction from nearest town or city street address of well if located within city?  
3 mi. N of Lyons - 1940 State 14 Rd

2 WATER WELL OWNER: Terry McGreevy  
 RR#, St. Address, Box # : 1940 State 14 Rd  
 City, State, ZIP Code : Lyons, KS 67554

Board of Agriculture, Division of Water Resources  
Application Number:



4 DEPTH OF COMPLETED WELL 61 ft. ELEVATION:

Depth(s) Groundwater Encountered 1. \_\_\_\_\_ ft. 2. \_\_\_\_\_ ft. 3. \_\_\_\_\_ ft.

WELL'S STATIC WATER LEVEL 30 ft. below land surface measured on mo/day/yr 11-7-96

Pump test data: Well water was 59 ft. after 12 hours pumping 10 gpm

Est. Yield 10 gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

Bore Hole Diameter 8 in. to 67 ft. and 5 1/2 in. to 96 ft.

WELL WATER TO BE USED AS:

|  |                                       |   |   |   |
|--|---------------------------------------|---|---|---|
| <input checked="" type="checkbox"/> 1 Domestic | <input type="checkbox"/> 3 Feedlot    | <input type="checkbox"/> 6 Oil field water supply | <input type="checkbox"/> 9 Dewatering       | <input type="checkbox"/> 11 Injection well        |
| <input type="checkbox"/> 2 Irrigation          | <input type="checkbox"/> 4 Industrial | <input type="checkbox"/> 7 Lawn and garden only   | <input type="checkbox"/> 10 Monitoring well | <input type="checkbox"/> 12 Other (Specify below) |

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:

|   |                                     |  |  |   |
|---|-------------------------------------|--|--|---|
| <input checked="" type="checkbox"/> 1 Steel | <input type="checkbox"/> 3 RMP (SR) | <input type="checkbox"/> 5 Wrought iron    | <input type="checkbox"/> 8 Concrete tile         | CASING JOINTS: <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped |
| <input checked="" type="checkbox"/> 2 PVC   | <input type="checkbox"/> 4 ABS      | <input type="checkbox"/> 6 Asbestos-Cement | <input type="checkbox"/> 9 Other (specify below) | <input type="checkbox"/> Welded   |
| <input type="checkbox"/> 7 Fiberglass       |                                     |  |  | <input type="checkbox"/> Threaded   |

Blank casing diameter \_\_\_\_\_ in. to 41 ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.

Casing height above land surface 24 in. weight 2.29 lbs./ft. Wall thickness or gauge No. 160

TYPE OF SCREEN OR PERFORATION MATERIAL:

|                                  |   |  |   |   |
|----------------------------------|---|--|---|---|
| <input type="checkbox"/> 1 Steel | <input type="checkbox"/> 3 Stainless steel  | <input type="checkbox"/> 5 Fiberglass    | <input checked="" type="checkbox"/> 7 PVC | <input type="checkbox"/> 10 Asbestos-cement       |
| <input type="checkbox"/> 2 Brass | <input type="checkbox"/> 4 Galvanized steel | <input type="checkbox"/> 6 Concrete tile | <input type="checkbox"/> 8 RMP (SR)       | <input type="checkbox"/> 11 Other (specify)       |
|                                  |   |  | <input type="checkbox"/> 9 ABS            | <input type="checkbox"/> 12 None used (open hole) |

SCREEN OR PERFORATION OPENINGS ARE:

|   |  |   |   |  |
|---|--|---|---|--|
| <input type="checkbox"/> 1 Continuous slot  | <input type="checkbox"/> 3 Mill slot   | <input type="checkbox"/> 5 Gauzed wrapped | <input checked="" type="checkbox"/> 8 Saw cut | <input type="checkbox"/> 11 None (open hole) |
| <input type="checkbox"/> 2 Louvered shutter | <input type="checkbox"/> 4 Key punched | <input type="checkbox"/> 6 Wire wrapped   | <input type="checkbox"/> 9 Drilled holes      |  |
|   |  | <input type="checkbox"/> 7 Torch cut      | <input type="checkbox"/> 10 Other (specify)   |  |

SCREEN-PERFORATED INTERVALS: From 41 ft. to 61 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From 23 ft. to 30 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

From 35 ft. to 96 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6 GROUT MATERIAL:

|  |   |   |                                  |
|--|---|---|----------------------------------|
| <input type="checkbox"/> 1 Neat cement | <input type="checkbox"/> 2 Cement grout | <input checked="" type="checkbox"/> 3 Bentonite | <input type="checkbox"/> 4 Other |
|--|---|---|----------------------------------|

Grout Intervals: From 3 ft. to 23 ft., From 30 ft. to 35 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

|   |  |  |   |   |
|---|--|--|---|---|
| <input checked="" type="checkbox"/> 1 Septic tank | <input type="checkbox"/> 4 Lateral lines | <input type="checkbox"/> 7 Pit privy     | <input type="checkbox"/> 10 Livestock pens      | <input type="checkbox"/> 14 Abandoned water well  |
| <input type="checkbox"/> 2 Sewer lines            | <input type="checkbox"/> 5 Cess pool     | <input type="checkbox"/> 8 Sewage lagoon | <input type="checkbox"/> 11 Fuel storage        | <input type="checkbox"/> 15 Oil well/Gas well     |
| <input type="checkbox"/> 3 Watertight sewer lines | <input type="checkbox"/> 6 Seepage pit   | <input type="checkbox"/> 9 Feedyard      | <input type="checkbox"/> 12 Fertilizer storage  | <input type="checkbox"/> 16 Other (specify below) |
|   |  |  | <input type="checkbox"/> 13 Insecticide storage |   |

Direction from well? N How many feet? 145

| FROM | TO | LITHOLOGIC LOG    | FROM | TO | PLUGGING INTERVALS |
|------|----|-------------------|------|----|--------------------|
| 0    | 7  | Gr Clay           |      |    |                    |
| 7    | 19 | Br Clay silt      |      |    |                    |
| 19   | 46 | Br Clay           |      |    |                    |
| 46   | 51 | Sand Stone & Rock |      |    |                    |
| 51   | 59 | Br Clay           |      |    |                    |
| 59   | 67 | Gr Clay           |      |    |                    |
| 67   | 69 | Sand Stone        |      |    |                    |
| 69   | 96 | Br Clay           |      |    |                    |
| 96   |    | 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) 11-7-96 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 447 This Water Well Record was completed on (mo/day/yr) 11-11-96 under the business name of Miller Drilling 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.