

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

1 LOCATION OF WATER WELL: County: Greeley Fraction: SW 1/4 SW 1/4 SE 1/4 Section Number: 22 Township Number: T 20 S Range Number: R 39 E W

Distance and direction from nearest town or city street address of well if located within city? 75 ft. north  
 From southeast corner of Selkirk - 13 1/2 miles south, 4 miles west, 1 mile north 2,445 ft. west

2 WATER WELL OWNER: Blake Himmelwright  
 RR#, St. Address, Box #: P. O. Box 987 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Pratt, Kansas 67124 Application Number: 42,659

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N			
	NW	NE	
	SW	SE	X
S			

4 DEPTH OF COMPLETED WELL: 218 ft. ELEVATION: \_\_\_\_\_

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

WELL'S STATIC WATER LEVEL 162 ft. below land surface measured on mo/day/yr 6/19/97

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 30 in. to 218 ft., and \_\_\_\_\_ in. to \_\_\_\_\_ ft.

WELL WATER TO BE USED AS:

<input 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 checked="" 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  X; If yes, mo/day/yr sample was submitted \_\_\_\_\_

Water Well Disinfected? Yes \_\_\_\_\_ No  X

5 TYPE OF BLANK CASING USED:

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

Blank casing diameter 16 in. to 173 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.

Casing height above land surface 12 in., weight 42.05 lbs./ft. Wall thickness or gauge No. 250

TYPE OF SCREEN OR PERFORATION MATERIAL:

<input checked="" type="checkbox"/> 1 Steel	<input type="checkbox"/> 3 Stainless steel	<input type="checkbox"/> 5 Fiberglass	<input type="checkbox"/> 8 RMP (SR)	<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"/> 9 ABS	<input type="checkbox"/> 11 Other (specify) _____
				<input type="checkbox"/> 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

<input type="checkbox"/> 1 Continuous slot	<input checked="" type="checkbox"/> 3 Mill slot	<input checked="" type="checkbox"/> 6 Wire wrapped	<input 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"/> 7 Torch cut	<input type="checkbox"/> 9 Drilled holes	
			<input type="checkbox"/> 10 Other (specify) _____	

SCREEN-PERFORATED INTERVALS: From 173 ft. to 218 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From 20 ft. to 218 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6 GROUT MATERIAL:  1 Neat cement  2 Cement grout  3 Bentonite  4 Other \_\_\_\_\_

Grout intervals: From 0 ft. to 20 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

<input 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	<u>n/a</u>

Direction from well? \_\_\_\_\_ How many feet? \_\_\_\_\_

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
		see attached log			

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) 6/28/97 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 208 This Water Well Record was completed on (mo/day/yr) 7/1/97 under the business name of Minter-Wilson Drilling Co., Inc. by (signature) nora Keller

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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