

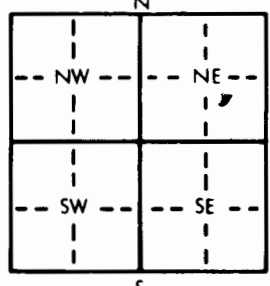
FREEDA DRALLE

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

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: STAFFORD	NW 1/4 SE 1/4 NE 1/4	9	T 22 S	R 14 E

Distance and direction from nearest town or city street address of well if located within city?
RADLUM 13 1/4 E 114.5 WESTSIDE

2 WATER WELL OWNER: **STERLING DRILLING INC.** **FREEDA DRALLE, ST. JOHNS, KS.**
RR#, St. Address, Box #: **BOX 129**
City, State, ZIP Code: **STERLING, KS 67579** Board of Agriculture, Division of Water Resources
Application Number: **T83-194**

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


4 DEPTH OF COMPLETED WELL: **60** ft. ELEVATION: _____
Depth(s) Groundwater Encountered 1. **40** ft. 2. _____ ft. 3. _____ ft.
WELL'S STATIC WATER LEVEL **22** ft. below land surface measured on mo/day/yr **5-17-83**
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 **7 7/8** in. to **6 0** in., and _____ 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 Observation 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 **X** Clamped _____
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
Blank casing diameter **5** in. to **4 0** in., Dia. _____ in. to _____ in., weight _____ lbs./ft. Wall thickness or gauge No. **2-14**
TYPE OF SCREEN OR PERFORATION MATERIAL: 7 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: **1/8**
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
2 Louvered shutter 4 Key punched 7 Torch cut 9 Drilled holes 10 Other (specify) _____
SCREEN-PERFORATED INTERVALS: From **7 0** ft. to **6 0** ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From **1 0** ft. to **6 0** 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 **0** ft. to **10** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
What is the nearest source of possible contamination: **NONE**
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	LITHOLOGIC LOG
0	4	SANDY SOIL			
4	25	FINE SAND			
25	30	CLAY			
30	40	SANDY CLAY			
40	60	GRAVEL			

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) **5-17-83** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **389**. This Water Well Record was completed on (mo/day/yr) **5-29-83** under the business name of **REISER WATER WELL SERV. INC.** by (signature) *Rudolph Reiser*
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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.