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

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: Harvey	NE ¼ SE ¼ NE ¼	34	T 22 S	R 3 E/W

Distance and direction from nearest town or city? 2 East Burrton, 4 1/2 North

Street address of well if located within city?

2 WATER WELL OWNER: Ken Stucky
RR#, St. Address, Box # : Route 2
City, State, ZIP Code : Burrton, KS 67020

Board of Agriculture, Division of Water Resources Application Number:

3 DEPTH OF COMPLETED WELL 90 ft. Bore Hole Diameter 10 in. to 90 ft., and ..... in. to ..... ft.

Well Water to be used as: 1 Domestic X 2 Irrigation 3 Feedlot 4 Industrial 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Observation well 11 Injection well 12 Other (Specify below)

Well's static water level 20 ft. below land surface measured on 12 month 17 day 1980 year

Pump Test Data: Well water was 28 ft. after 1 hours pumping 80 gpm
Est. Yield 80 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

4 TYPE OF BLANK CASING USED: 1 Steel 2 PVC XXX 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)

Casing Joints: Glued X Clamped ..... Welded ..... Threaded .....

Blank casing dia 5 in. to 0 ft., Dia 5 in. to 80 ft., Dia ..... in. to .216 ft.
Casing height above land surface XXX 18 in., weight 160 lbs./ft. Wall thickness or gauge No .....

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile XX PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)

Screen or Perforation Openings Are: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut XXX Saw cut 9 Drilled holes 10 Other (specify) 11 None (open hole)

Screen-Perforation Dia 5 in. to 70 ft., Dia 5 in. to 90 ft., Dia ..... in to ..... ft.
Screen-Perforated Intervals: From 70 ft. to 90 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.
Gravel Pack Intervals: From 10 ft. to 90 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

5 GROUT MATERIAL: XX 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....
Grouted Intervals: From 0 ft. to 10 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination: 1 Septic tank 2 Sewer lines 3 Lateral lines 4 Cess pool 5 Seepage pit 6 Pit privy X Livestock pens 8 Feed yard 9 Sewage lagoon 10 Fuel storage 11 Fertilizer storage 12 Insecticide storage 13 Watertight sewer lines 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)

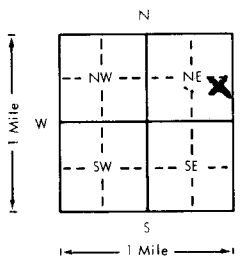
Direction from well South How many feet 400 ? Water Well Disinfected? Yes X No

Was a chemical/bacteriological sample submitted to Department? Yes ..... No X If yes, date sample was submitted ..... month ..... day ..... year: Pump Installed? Yes ..... No X

If Yes: Pump Manufacturer's name ..... Model No. ..... HP ..... Volts .....
Depth of Pump Intake ..... ft. Pumps Capacity rated at ..... gal./min.
Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was XXX constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 12 month 17 day 1980 year, and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134
This Water Well Record was completed on 12 month 17 day XX 1980 year under the business name of Rosencrantz-Bemis by (signature) Mike Flaws

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



ELEVATION:

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Top Soil			
3	10	Fine Sand			
10	35	Clay			
35	46	Equuis			
46	60	Clay			
60	90	Equuis			

Depth(s) Groundwater Encountered 1 ..... ft. 2 ..... ft. 3 ..... ft. 4 ..... ft. (Use a second sheet if needed)

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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T 22 R 3 E/W SEC 34 NE ¼ SE ¼ NE ¼