WATER WELL RECORD   Form WWC-5   KSA 82a-1212   ID No. _____

1 LOCATION OF WATER WELL:

County: Harvey	Fraction NW¼ SE¼ SW¼	Section Number 35	Township Number T 23 S	Range Number R 2 E/W

Distance and direction from nearest town or city street address of well if located within city?

305 Harvey in Halstead

2 WATER WELL OWNER:

RR#, St. Address, Box #   : Marie Regier
City, State, ZIP Code   :   305 Harvey
Halstead, KS 67056

Board of Agriculture, Division of Water Resources
Application Number:

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

```
            N
     |    |    |
  -- NW --|-- NE --
     |    |    |
  W -------|------- E
     |    |    |
  -- SW --|-- SE --
     X    |    |
     |    |    |
            S
```
1 Mile / 1 Mile

4 DEPTH OF COMPLETED WELL..... 86 .....ft. ELEVATION:.................

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

WELL'S STATIC WATER LEVEL... 24 ...ft. below land surface measured on mo/day/yr ... 9-5-01

Pump test data: Well water was .... 28 ...ft. after ...... 1 ...... hours pumping .. 25 ....gpm

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

Bore Hole Diameter..... 8 .....in. to .... 90 ....ft., and................... in. to .... ft.

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 Domestic (lawn & garden) 10 Monitoring well ....

Was a chemical/bacteriological sample submitted to Department? Yes....... No.. X..; If yes, mo/day/yrs sample was submitted
Water Well Disinfected? Yes X   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 ....
		7 Fiberglass		Threaded...................

Blank casing diameter .... 5 ...in. to 76 ....ft., Dia ....in. to ....ft., Dia ....in. to ....ft.

Casing height above land surface.... 12 ...in., weight 2.29 .... lbs./ft. Wall thickness or gauge No. 160 ....

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: 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   10 Other (specify) ....ft.

SCREEN-PERFORATED INTERVALS: From.... 76 ....ft. to 86 .....ft., From ....ft. to ....ft.
From..........ft. to ....ft., From ....ft. to ....ft.

GRAVEL PACK INTERVALS: From..... 22 ....ft. to 55 ....ft., From ....ft. to ....ft.
From..... 60 ....ft. to 90 ....ft., From ....ft. to ....ft.

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

Grout Intervals: From.. 2 ....ft. to 22 .....ft., From 55 ....ft. to 60 .....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	....

Direction from well? S   How many feet? 40

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
O	29	Br + Gr Clay			
29	50	Gr F-C Sand			
50	86	Br M-C Sand			
86	90	Br Clay			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:

This water well was ④ constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) .... 9-5-01 .... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No..... 447 .... This Water Well Record was completed on (mo/day/yr) .... 9-9-01 ....

under the business name of Miller Drilling   by (signature) G. Miller

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 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of $5.00 for each constructed well.