

MW-3

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

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: <u>Stafford</u>		<u>SE 1/4 SE 1/4 SE 1/4</u>		<u>14</u>		T <u>24</u> S		R <u>12</u> EW	
Distance and direction from nearest town or city street address of well if located within city? <u>517 S. Main; Stafford KS</u>									
2 WATER WELL OWNER:									
RR#, St. Address, Box # : <u>Marvin Bayse</u>									
City, State, ZIP Code : <u>Stafford KS 67587</u>									
Board of Agriculture, Division of Water Resources Application Number:									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>25.5</u> ft. ELEVATION: <u>NA</u>							
		Depth(s) Groundwater Encountered 1. <u>19.0</u> ft. 2. _____ ft. 3. _____ ft.							
		WELL'S STATIC WATER LEVEL <u>19.12</u> ft. below land surface measured on mo/day/yr <u>11-11-92</u>							
		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 <u>8</u> in. to _____ ft. and _____ in. to _____ ft.							
		WELL WATER TO BE USED AS:							
		1 Domestic		3 Feedlot		6 Oil field water supply		9 Dewatering	
		2 Irrigation		4 Industrial		7 Lawn and garden only		10 Monitoring well	
		11 Injection well							
		12 Other (Specify below)							
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr sample was submitted _____							
		Water Well Disinfected? Yes _____ No <u>X</u>							
5 TYPE OF BLANK CASING USED:									
1 Steel		3 RMP (SR)		5 Wrought iron		8 Concrete tile		CASING JOINTS: Glued _____ Clamped _____	
<u>2 PVC</u>		4 ABS		6 Asbestos-Cement		9 Other (specify below)		Welded _____	
				7 Fiberglass				<u>Threaded</u> <u>Flush</u>	
Blank casing diameter <u>2</u> in. to _____ ft., Dia _____ in. to _____ ft.									
Casing height above land surface <u>Flush</u> in., weight <u>70.3</u> lbs./ft. Wall thickness or gauge No. <u>154</u>									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel		3 Stainless steel		5 Fiberglass		8 RMP (SR)		10 Asbestos-cement	
2 Brass		4 Galvanized steel		6 Concrete tile		9 ABS		11 Other (specify)	
								12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:									
1 Continuous slot		<u>3 Mill slot</u>		5 Gauzed wrapped		8 Saw cut		11 None (open hole)	
2 Louvered shutter		4 Key punched		6 Wire wrapped		9 Drilled holes			
				7 Torch cut		10 Other (specify)			
SCREEN-PERFORATED INTERVALS:									
From <u>15.5</u> ft. to <u>25.5</u> ft.		From _____ ft. to _____ ft.							
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.							
GRAVEL PACK INTERVALS:									
From <u>14.5</u> ft. to <u>25.5</u> ft.		From _____ ft. to _____ ft.							
From _____ ft. to _____ ft.		From _____ ft. to _____ ft.							
6 GROUT MATERIAL:									
1 Neat cement		2 Cement grout		<u>3 Bentonite</u>		4 Other			
Grout Intervals: From <u>14.5</u> ft. to <u>1.0</u> ft. From _____ ft. to _____ 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		<u>11 Fuel storage</u>		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? <u>South</u>						How many feet? <u>5</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS				
0.0	5.0	Clay, Silty							
5.0	10.0	Clay, Silty							
10.0	15.0	Sand, fine grained, clayey							
15.0	20.0	Sand, fine grained							
20.0	25.5	Sand, silty							
Flush Mount granted on 10-22-92 for KDHE no 01093070; Bayse Well Servicing Co. by Don Taylor									
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed</u> , <u>(2) reconstructed</u> , or <u>(3) plugged</u> under my jurisdiction and was completed on (mo/day/year) <u>11-9-92</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>531</u> This Water Well Record was completed on (mo/day/yr) <u>11-25-92</u> under the business name of <u>GSI</u> by (signature) <u>Allison Irwin</u>									
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.									

OFFICE USE ONLY

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