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

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: KEARNY	NE ¼ NW ¼ SW ¼	11	T 24 S	R 35 E/W

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

710 BEECH DEERFIELD

2 WATER WELL OWNER: ESTHER MCMICHEAL

RR#, St. Address, Box # : PO BOX 1766

City, State, ZIP Code : GARDEN CITY KANSAS 67846

Board of Agriculture, Division of Water Resource

Application Number:

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

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        N
  --------------------
  | -X- NW | -- NE -- |
  |  X     |          |
W | ------ | -------- | E
  | -- SW  | -- SE -- |
  --------------------
        S
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(1 Mile scale shown on left / W on left, E on right)

4 DEPTH OF COMPLETED WELL ..9.. ft. ELEVATION:

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

WELL'S STATIC WATER LEVEL ...0... ft. below land surface measured on mo/day/yr 2-15-94

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..........in. to ....ft, and ....in. to ....ft

WELL WATER ~~TO BE~~ WAS 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 Monitoring well ....

Was a chemical/bacteriological sample submitted to Department? Yes..........No..........; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes X   No

5 TYPE OF BLANK CASING USED: 5 Wrought iron   8 Concrete tile   CASING JOINTS: Glued ......Clamped......

(1 Steel)   3 RMP (SR)   6 Asbestos-Cement   9 Other (specify below)   Welded ....

2 PVC   #4 ABS   7 Fiberglass   ....   Threaded..................

Blank casing diameter 4 ....in. to ....ft., Dia ....in. to ....ft., Dia ....in. to ....ft

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

TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC   10 Asbestos-cement

1 Steel   3 Stainless steel   5 Fiberglass   8 RMP (SR)   11 Other (specify) ..NA..

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   NA   7 Torch cut   NA   10 Other (specify) ....NA..

SCREEN-PERFORATED INTERVALS: From..NA..ft. to ..NA..ft., From..........ft. to ....ft

From..........ft. to ....ft., From..........ft. to ....ft

GRAVEL PACK INTERVALS: From..........ft. to ....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....9..ft. to ..3..ft., From ..3..ft. to. ..0..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? NORTH   How many feet? 50

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
			9	3	CEMENT
			3	0	CEMENT

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) 4-21-94 and this record is true to the best of my knowledge and belief. Kansa

Water Well Contractor's License No. .... This Water Well Record was completed on (mo/day/yr) 5-4-94

under the business name of   by (signature) Esther McMicheal

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.