

**WATER WELL RECORD Form WWC-5**

<b>1 LOCATION OF WATER WELL:</b>	Fraction NE ¼ SE ¼ NW ¼	Section Number 11	Township Number T 24 S	Range Number R 35 EW
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Distance and direction from nearest town or city street address of well if located within city?

906 ELM DEERFIELD

<b>2 WATER WELL OWNER:</b> ELIZABETH BELL	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #: P O. BOX 42	Application Number:
City, State, ZIP Code: DEERFIELD KANSAS 67838	

<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>	<b>4 DEPTH OF COMPLETED WELL:</b> 26 ft. <b>ELEVATION:</b> .....
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Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.

WELL'S STATIC WATER LEVEL DRY 999 ft. below land surface measured on mo/day/yr 3-10-94

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

WELL WATER TO BE USED AS:  1 Domestic  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 Monitoring well  11 Injection well  12 Other (Specify below)

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

Water Well Disinfected? Yes  No

<b>5 TYPE OF BLANK CASING USED:</b>	1 Steel <input checked="" type="checkbox"/> 2 PVC	3 RMP (SR) 4 ABS	5 Wrought iron 6 Asbestos-Cement 7 Fiberglass	8 Concrete tile 9 Other (specify below)	CASING JOINTS: Glued ..... Clamped ..... Welded ..... Threaded .....
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Blank casing diameter 6 in. to ... ft., Dia. .... in. to ... ft., Dia. .... in. to ... ft.

Casing height above land surface 72 in., weight .... lbs./ft. Wall thickness or gauge No. ....

<b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b>		
1 Steel	3 Stainless steel	5 Fiberglass
2 Brass	4 Galvanized steel	6 Concrete tile
<b>SCREEN OR PERFORATION OPENINGS ARE:</b>		
1 Continuous slot	3 Mill slot	5 Gauzed wrapped
2 Louvered shutter	4 Key punched	6 Wire wrapped
<b>SCREEN-PERFORATED INTERVALS:</b>		
From NA ft. to NA ft.	From NA ft. to NA ft.	From NA ft. to NA ft.
<b>GRAVEL PACK INTERVALS:</b>		
From NA ft. to NA ft.	From NA ft. to NA ft.	From NA ft. to NA ft.

<b>6 GROUT MATERIAL:</b> 2 1 Neat cement	3 Bentonite 4 Other	5 Cement grout	6 Seepage pit
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Grout Intervals: From 9 ft. to 6 ft., From ... ft. to ... ft., From ... ft. to ... ft.

What is the nearest source of possible contamination: 3

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
<input checked="" type="checkbox"/> 3 Water/ sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
<b>Direction from well? EAST</b>			How many feet? 15	

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
			20 FT	9 FT	CLAY/ SUBSOIL
			9 FT	6 FT	CEMENT
			6 FT	0 FT	TOPSOIL ( PIT)

**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) 9-10-94 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .... This Water Well Record was completed on (mo/day/yr) 9-14-94 under the business name of Elizabeth E. Bell

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.