

WOOD 1-E

WATER WELL RECORD

Form WWC-5

KSA 82a-1212

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number			
County: <u>EDWARDS</u>		<u>NW 1/4 NW 1/4 SW 1/4</u>	<u>23</u>	T <u>26</u> S	R <u>16</u> E <u>W</u>			
Distance and direction from nearest town or city? <u>TRUSDALE 2 1/2 S 2 E 1/2 S EASTSIDE</u>			Street address of well if located within city?					
2 WATER WELL OWNER: <u>STERLING DRILLING CO</u>								
R.R. #, St. Address, Box #: <u>129</u>			Board of Agriculture, Division of Water Resources					
City, State, ZIP Code: <u>STERLING, KS 67579</u>			Application Number:					
3 DEPTH OF COMPLETED WELL: <u>80</u> ft. Bore Hole Diameter: <u>9</u> in. to <u>80</u> ft., and _____ in. to _____ ft.								
Well Water to be used as:								
1 Domestic		3 Feedlot		5 Public water supply				
2 Irrigation		4 Industrial		6 Oil field water supply				
		7 Lawn and garden only		8 Air conditioning				
				9 Dewatering				
				11 Injection well				
				12 Other (Specify below)				
				10 Observation well				
Well's static water level: <u>22</u> ft. below land surface measured on <u>Jan</u> month <u>21</u> day <u>1981</u> year								
Pump Test Data: <u>NONE</u> Well water was _____ ft. after _____ hours pumping _____ gpm								
Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm								
4 TYPE OF BLANK CASING USED:								
1 Steel		3 RMP (SR)		5 Wrought iron				
2 PVC		4 ABS		6 Asbestos-Cement				
				7 Fiberglass				
				8 Concrete tile				
				9 Other (specify below)				
Blank casing dia: <u>5</u> in. to <u>60</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.								
Casing height above land surface: <u>12</u> in., weight <u>23.5</u> lbs./ft. Wall thickness or gauge No. <u>214</u>								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
1 Steel		3 Stainless steel		5 Fiberglass				
2 Brass		4 Galvanized steel		6 Concrete tile				
				7 PVC				
				8 RMP (SR)				
				9 ABS				
				10 Asbestos-cement				
				11 Other (specify)				
				12 None used (open hole)				
Screen or Perforation Openings Are: <u>1/8</u>								
1 Continuous slot		3 Mill slot		5 Gauzed wrapped				
2 Louvered shutter		4 Key punched		6 Wire wrapped				
				7 Torch cut				
				8 Saw cut				
				11 None (open hole)				
				9 Drilled holes				
				10 Other (specify)				
Screen-Perforation Dia: <u>5</u> in. to <u>80</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.								
Screen-Perforated Intervals: From <u>60</u> ft. to <u>80</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.								
Gravel Pack Intervals: From <u>50</u> ft. to <u>80</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.								
5 GROUT MATERIAL:								
1 Neat cement		2 Cement grout		3 Bentonite				
4 Other								
Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.								
What is the nearest source of possible contamination: <u>NONE</u>								
1 Septic tank		4 Cess pool		7 Sewage lagoon				
2 Sewer lines		5 Seepage pit		8 Feed yard				
3 Lateral lines		6 Pit privy		9 Livestock pens				
				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 _____ How many feet _____ ? Water Well Disinfected? Yes _____ No <u>✓</u>								
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>✓</u> If yes, date sample _____								
was submitted _____ month _____ day _____ year: Pump Installed? Yes _____ No <u>✓</u>								
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 (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month _____ day _____ year								
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>389</u>								
This Water Well Record was completed on _____ month _____ day _____ year under the business name of <u>MYERS WATER WELL SERVICE</u> by (signature) <u>Rudolph Precin</u>								
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:								
		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	
		0	5	SANDY SOIL				
		5	25	FINE SAND				
		25	45	CLAY				
		45	50	SANDY CLAY				
		50	80	GRAVEL				
ELEVATION:								
Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)								

OFFICE USE ONLY

T

B6

R

16

B7D

SEC

B3

NW 1/4 NW 1/4 SW 1/4

X