

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

1 LOCATION OF WATER WELL: County: <u>Pratt</u>	Fraction <u>SW 1/4 NE 1/4 NE 1/4</u>	Section Number <u>19</u>	Township Number <u>T 27 S</u>	Range Number <u>R 12 E/W</u>
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Distance and direction from nearest town or city street address of well if located within city?

1 3/4 miles south of Natrona, Ks.

2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code	<u>John McGuire</u> <u>30212 NE 20</u> <u>Pratt, Ks. 67124</u>	Board of Agriculture, Division of Water Resources Application Number:
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>148</u> ft. ELEVATION:
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Depth(s) Groundwater Encountered 1. \_\_\_\_\_ ft. 2. \_\_\_\_\_ ft. 3. \_\_\_\_\_ ft.

WELL'S STATIC WATER LEVEL 50 ft. below land surface measured on mo/day/yr 7-14-98

Pump test data: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

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

Bore Hole Diameter 7 in. to 150 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
2 Irrigation	4 Industrial	7 Lawn and garden only
		9 Dewatering
		10 Monitoring well
		12 Other (Specify below)

test hole

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

Water Well Disinfected? Yes \_\_\_\_\_ No

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
2 <u>PVC</u>	4 ABS	7 Fiberglass	Welded _____
Blank casing diameter <u>3</u> in. to <u>143</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.			Threaded _____
Casing height above land surface <u>2 1/2</u> in., weight <u>SCH. 80</u> 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)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS
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) _____
SCREEN-PERFORATED INTERVALS: From <u>143</u> ft. to <u>148</u> ft., From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS: From <u>150</u> ft. to <u>138</u> ft., From _____ ft. to _____ ft.			

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other <u>hole plug 138'-136'</u>
Grout Intervals: From <u>136</u> ft. to <u>30</u> ft., From _____ ft. to _____ ft., From <u>30'-0ft.</u> to _____ ft.				
What is the nearest source of possible contamination:	10 Livestock pens	14 Abandoned water well		
1 Septic tank	4 Lateral lines	7 Pit privy	11 Fuel storage	15 Oil well/Gas well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	12 Fertilizer storage	16 Other (specify below)
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	13 Insecticide storage	<u>none</u>
Direction from well?	How many feet?			

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Top soil	148	150	Red bed
2	3	Brown loay			
3	13	Dirty sand and gravel			
13	28	Brown & white clay			
28	32	Sandy brown clay & white rock			
32	43	Sand & gravel			
43	50	Sand & clay mixed			
50	61	Clay & sand mixed			
61	89 1/2	Medium sand & gravel			
89 1/2	96	Brown & gray clay			
96	118	Sand & gravel loose & coarse			
118	135	Brown & gray clay			
135	138	Sandy gray clay			
138	143	Sand brown clay w/ sand mixed			
143	148	Sand and gravel loose, medium			

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) <u>7-15-98</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>134</u> This Water Well Record was completed on (mo/day/yr) <u>7-16-98</u> under the business name of <u>Rosencrantz-Bemis</u> by (signature) <u>Judith Redson</u>
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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 T R E/W SEC. 1/4 1/4