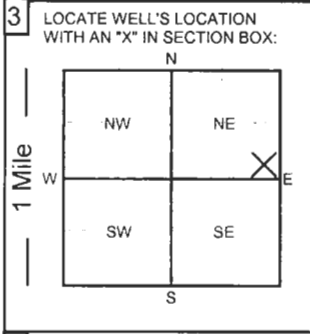


WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: Kingman	FRACTION SE 1/4 SE 1/4 NE 1/4	SECTION NUMBER 36	TOWNSHIP NUMBER T 27 S	RANGE NUMBER R 5W E/W
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Distance and direction from nearest town or city street address of well if located within city?
391st West & Old Hwy. 54, 1 mile West, 1/2 mile South, Northwest corner, North side Cheney, Kansas

2 WATER WELL OWNER: LITTLE, Danny RR#, ST. ADDRESS, BOX #: 16940 N.E. 4th CITY, STATE: Cheney, Kansas	Board of Agriculture, Division of Water Resource Application Number:
ZIP CODE:	



4 DEPTH OF COMPLETED WELL: **83** ft. ELEVATION:

Depth of groundwater Encountered: _____ ft.

WELL'S STATIC WATER LEVEL **15** FT. BELOW LAND SURFACE MEASURED ON **9/2/04** mo/day/yr:

Pump test data: Well water was _____ ft. after _____ hours of pumping @ _____ gpm

Est. Yield: _____ gpm Well water was _____ ft. after _____ hours of pumping @ _____ gpm

Bore Hole Diameter **12** in. to **83** ft. and _____ in. to _____ ft.

WELL WATER TO BE USED AS:

1. Domestic 3. Feedlot 5. Public water supply **7. Lawn and garden only** 9. Dewatering 11. Injection well

2. Irrigation 4. Industrial 6. Oil field water supply 8. Air conditioning 10. Monitoring well 12. Other (Specify below) _____

Was a chemical/bacteriological sample submitted to Department? YES **NO** ; If yes, what mo/day/yr was sample submitted _____

Was Water Well Disinfected? **YES** NO

5 TYPE OF CASING USED:

1. Steel <input type="checkbox"/>	3. RPM (SR) <input type="checkbox"/>	5. Wrought Iron <input type="checkbox"/>	7. Fiberglass <input type="checkbox"/>	9. Other (Specify below) _____	CASING JOINTS: Glued <input checked="" type="checkbox"/> Threaded <input type="checkbox"/>
2. PVC <input checked="" type="checkbox"/>	4. ABS <input type="checkbox"/>	6. Asbestos-Cement <input type="checkbox"/>	8. Concrete tile <input type="checkbox"/>	SDR-26	Welded <input type="checkbox"/> Clamped <input type="checkbox"/>

Blank casing diameter **5** in. to **23** ft., Dia. _____ in. to _____ ft. Dia. _____ in. to _____ ft.

Casing height above land surface: **12** in., Weight: **2.35** lbs. / ft. Wall thickness or gauge No. **.214**

TYPE OF SCREEN OR PERFORATION MATERIAL:

1. Steel <input type="checkbox"/>	3. Stainless Steel <input type="checkbox"/>	5. Fiberglass <input type="checkbox"/>	7. PVC <input checked="" type="checkbox"/>	9. ABS <input type="checkbox"/>	11. Other (specify) _____
2. Brass <input type="checkbox"/>	4. Galvanized <input type="checkbox"/>	6. Concrete Tile <input type="checkbox"/>	8. RMP (SR) <input type="checkbox"/>	10. Asbestos-Cement <input type="checkbox"/>	12. None used (open hole) <input type="checkbox"/>

SCREEN OR PERFORATION OPENINGS ARE:

1. Continuous slot <input type="checkbox"/>	3. Mill slot <input type="checkbox"/>	5. Gauzed wrapped <input type="checkbox"/>	7. Torch cut <input type="checkbox"/>	9. Drilled holes <input type="checkbox"/>	11. None (open hole) <input type="checkbox"/>
2. Louvered shutter <input type="checkbox"/>	4. Key punched <input type="checkbox"/>	6. Wire wrapped <input type="checkbox"/>	8. Saw cut <input checked="" type="checkbox"/>	10. Other (specify) _____	

SCREEN - PERFORATION INTERVAL From **23** ft. to **83** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From **24** ft. to **83** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIALS: 1. Neat cement 2. Cement Grout 3. Bentonite Other **bentonite hole plug**

Grout Intervals: From **4** ft. to **24** ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

1. Septic tank <input type="checkbox"/>	4. Lateral lines <input type="checkbox"/>	7. Pit privy <input type="checkbox"/>	10. Livestock pens <input type="checkbox"/>	13. Insecticide storage <input type="checkbox"/>	15. Oil well/Gas well <input type="checkbox"/>
2. Sewer lines <input type="checkbox"/>	5. Cess Pool <input type="checkbox"/>	8. Sewage lagoon <input type="checkbox"/>	11. Fuel storage <input type="checkbox"/>	14. Abandon water well <input type="checkbox"/>	16. Other (specify below) _____
3. Watertight sewer line <input type="checkbox"/>	6. Seepage pit <input type="checkbox"/>	9. Feed yard <input type="checkbox"/>	12. Fertilizer storage <input type="checkbox"/>	None Apparent	

Direction from well? _____ How many feet? _____

From	To	LITHOLOGIC LOG	From	To	LITHOLOGIC LOG
0	4	topsoil			
4	5	fine sand			
5	83	shale			

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) **9/02/2004** and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. **236** This water well record was completed on (mo/day/year) **9/6/2004**

under the business name of **Harp Well & Pump Service Inc.** by (signature) *J o d d S. H a r p*