

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

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Pratt</u>		$\frac{1}{4}$ <u>C</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$	<u>8</u>	<u>T</u> <u>28</u> <u>S</u>	<u>R</u> <u>14</u> <u>W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1 1/4 east, 1/4 south of Cullison, Ks.</u>					
2 WATER WELL OWNER: <u>Leroy Maerckew</u>					
RR#, St. Address, Box # : <u>Rt. 4- Box 166</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>Pratt, Ks. 67021</u>			Application Number: <u>41,227</u>		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>184</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>8.4</u> ft. below land surface measured on mo/day/yr <u>12-19-97</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>1100</u> gpm: Well water was <u>11.8</u> ft. after <u>2 1/2</u> hours pumping <u>800</u> gpm			
		Bore Hole Diameter <u>28</u> in. to <u>18.4</u> 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 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 <u>X</u> ; If yes, mo/day/yr sample was sub-		Water Well Disinfected? Yes _____ No <u>X</u>			
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR)		5 Wrought iron 8 Concrete tile		CASING JOINTS: Glued <u>X</u> Clamped _____	
2 <u>PVC</u> 4 ABS		6 Asbestos-Cement 9 Other (specify below)		Welded _____	
Blank casing diameter <u>16</u> in. to <u>12.4</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.		7 Fiberglass		Threaded _____	
Casing height above land surface <u>12</u> in., weight <u>SDR 32.5</u> lbs./ft. Wall thickness or gauge No. _____					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass		7 <u>PVC</u> 10 Asbestos-cement			
2 Brass 4 Galvanized steel 6 Concrete tile		8 RMP (SR) 11 Other (specify) _____			
SCREEN OR PERFORATION OPENINGS ARE:		9 ABS 12 None used (open hole)			
1 Continuous slot 3 Mill slot 5 Gauzed wrapped		8 Saw cut 11 None (open hole)			
2 Louvered shutter 4 Key punched 6 Wire wrapped		9 Drilled holes			
SCREEN-PERFORATED INTERVALS:		7 Torch cut 10 Other (specify) _____			
From <u>12.4</u> ft. to <u>18.4</u> ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS:					
From <u>18.4</u> ft. to <u>20</u> 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 <u>20</u> ft. to <u>0</u> ft. From _____ ft. to _____ 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 none			
Direction from well?		How many feet?			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Top soil			
3	5	Brown clay			
5	63	Brown & white clay			
63	83	Sand and gravel clean medium loose			
83	98	Brown & white clay			
98	99	Hard white rock			
99	102	Sand and gravel clean, coarse, loose			
102	103 1/2	Hard white rock			
103 1/2	108 1/2	Sandy brown clay			
108 1/2	111 1/2	Sand nad gravel			
111 1/2	115	Tight sand and gravel dark colored			
115	124	Brown sand and gravel			
124	134	Sandy brown clay			
134	134 1/2	Hard white rock streaks			
134 1/2	184	Sand and gravel clean, coarse, loose			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>4-10-98</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>4-15-98</u> under the business name of <u>Rosencrantz-Bemis</u> by (signature) <u>Mredia Rodson</u>					
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.					

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