

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

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number					
County: <u>Kingman</u>		NW 1/4 NW 1/4 SE 1/4		8		T 29 S		R 6 E/W					
Distance and direction from nearest town or city street address of well if located within city? <u>3/4 north 1 west of Belmont, Ks.</u>													
2 WATER WELL OWNER:													
RR#, St. Address, Box # : City, State, ZIP Code :				Allen Drilling Box 1389 Great Bend, Ks.			Board of Agriculture, Division of Water Resources Application Number: T89-575						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF COMPLETED WELL <u>60</u> ft. ELEVATION: _____ ft.										
N 1 Mile W E S <table border="1" style="margin: auto; text-align: center;"><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE</td></tr></table>			NW	NE	SW	SE	Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.						
			NW	NE									
			SW	SE									
			WELL'S STATIC WATER LEVEL <u>27</u> ft. below land surface measured on mo/day/yr <u>12-15-89</u>										
			Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm										
Est. Yield <u>na</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm													
			Bore Hole Diameter <u>10</u> in. to <u>60</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 submitted _____										
			Water Well Disinfected? Yes <u>hth</u> No _____										
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 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____													
Blank casing diameter <u>5</u> in. to <u>40</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.													
Casing height above land surface <u>12</u> in. weight <u>258</u> lbs./ft. Wall thickness or gauge No. _____													
TYPE OF SCREEN OR PERFORATION MATERIAL:													
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement													
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) _____													
SCREEN OR PERFORATION OPENINGS ARE:													
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													
7 Torch cut 10 Other (specify) _____													
SCREEN-PERFORATED INTERVALS: From <u>40</u> ft. to <u>60</u> ft. From _____ ft. to _____ ft.													
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>60</u> ft. From _____ ft. to _____ ft.													
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other _____													
Grout Intervals: From <u>0</u> ft. to <u>20</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 _____													
Direction from well? <u>north west</u> How many feet? <u>120</u> ft.													
FROM		TO		LITHOLOGIC LOG		FROM		TO		PLUGGING INTERVALS			
0		3		Top soil									
3		7		Clay									
7		22		Sand									
22		35		Clay									
35		55		Gravel with sand									
55		60		Red bed									
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>12-15-89</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>12-21-89</u> under the business name of <u>Rosencrantz-Bemis</u> by (signature) <u>India 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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.													