

SW SW NW dri

WATER WELL RECORD Form WWC-5 KSA 62a-1212 ID No. _____

1 LOCATION OF WATER WELL: County: <u>Meade</u>	Fraction <u>00</u> $\frac{1}{4}$ <u>50</u> $\frac{1}{4}$ <u>500</u> $\frac{1}{4}$	Section Number <u>4</u>	Township Number T <u>31</u> S	Range Number R <u>28</u> E <u>0</u>
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Distance and direction from nearest town or city street address of well if located within city?
6 1/2 N + 2 W from Meade

2 WATER WELL OWNER: David Clowson

RR#, St. Address, Box # : _____
City, State, ZIP Code : Plains, KS 67569

Board of Agriculture, Division of Water Resources
Application Number: _____

3 LOCATE WELL'S LOCATION WITHIN AN "X" IN SECTION BOX:

	4 DEPTH OF COMPLETED WELL <u>294</u> ft. ELEVATION: _____ Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL <u>158</u> ft. below land surface measured on <u>6-9-04</u> mo/day/yr Pump test data: Well water was <u>158</u> ft. after _____ hours pumping <u>3.0</u> gpm Est. Yield <u>50</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm WELL WATER TO BE USED AS: <input checked="" type="checkbox"/> Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) <input type="checkbox"/> Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well
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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:

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

Blank casing diameter 5 in. to 2.54 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
Casing height above land surface 18 in., weight _____ lbs./ft. Wall thickness or gauge No. 2004

TYPE OF SCREEN OR PERFORATION MATERIAL:

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

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	<input checked="" type="checkbox"/> 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) _____	ft.

SCREEN-PERFORATED INTERVALS: From 254 ft. to 294 ft., From _____ ft. to _____ ft.
From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 20 ft. to 294 ft., From _____ ft. to _____ ft.
From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other _____

Grout Intervals: From 4 ft. to 20 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
<input checked="" type="checkbox"/> 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? S How many feet? 2000

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	8	topsoil			
8	17	white clay			
17	25	brown clay			
25	32	clayey			
32	45	sand			
45	75	brown clay			
75	116	sand			
116	125	brown clay			
125	138	sand			
138	160	yellow clay			
160	250	sand + gravel			
250	272	blue clay			
272	294	sand + gravel			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 6-11-04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 101 This Water Well Record was completed on (mo/day/yr) 6-21-04 under the business name of Bartel Well Drilling, Inc. by (signature) Reuben J. Bartel

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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.