

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

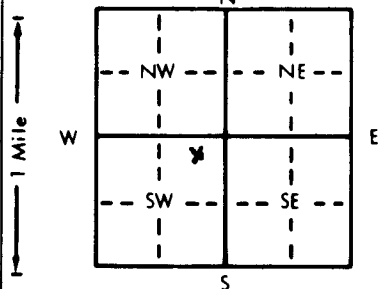
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Decatur</u>	<u>NE 1/4 NE 1/4 SW 1/4</u>	<u>12</u>	<u>T 3 S</u>	<u>R 29 E/W</u>

Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: Richard May
 RR#, St. Address, Box # : Rt. 3
 City, State, ZIP Code : Oberlin, Kansas 67749

Board of Agriculture, Division of Water Resources
Application Number:

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



4 DEPTH OF COMPLETED WELL: 108 ft. ELEVATION: _____ ft.

Depth(s) Groundwater Encountered 1.93 ft. 2 ft. 3 ft. _____ ft.

WELL'S STATIC WATER LEVEL .93 ft. below land surface measured on mo/day/yr _____

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

Est. Yield .8 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter: 4.7 in. to _____ ft., and _____ in. to _____ ft.

WELL WATER TO BE USED AS:

<u>1</u> Domestic	<u>3</u> Feedlot	<u>6</u> Oil field water supply	<u>8</u> Air conditioning	<u>11</u> Injection well
<u>2</u> Irrigation	<u>4</u> Industrial	<u>7</u> Lawn and garden only	<u>9</u> Dewatering	<u>12</u> Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes _____ No X _____; If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes X No _____

5 TYPE OF BLANK CASING USED:

<u>1</u> Steel	<u>3</u> RMP (SR)	<u>5</u> Wrought iron	<u>8</u> Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped _____
<u>2</u> PVC	<u>4</u> ABS	<u>6</u> Asbestos-Cement	<u>9</u> Other (specify below)	Welded _____
		<u>7</u> Fiberglass		Threaded _____

Blank casing diameter 4 in. to 88 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface 12 in., weight _____ lbs./ft. Wall thickness or gauge No. 214

TYPE OF SCREEN OR PERFORATION MATERIAL:

<u>1</u> Steel	<u>3</u> Stainless steel	<u>5</u> Fiberglass	<u>7</u> PVC	<u>10</u> Asbestos-cement
<u>2</u> Brass	<u>4</u> Galvanized steel	<u>6</u> Concrete tile	<u>8</u> RMP (SR)	<u>11</u> Other (specify)
			<u>9</u> ABS	<u>12</u> None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

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

SCREEN-PERFORATED INTERVALS: From 108 ft. to 88 ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 108 ft. to 25 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 2 Cement grout 3 Bentonite 4 Other _____

Grout Intervals: From 25 ft. to 5 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

<u>1</u> Septic tank	<u>4</u> Lateral lines	<u>7</u> Pit privy	<u>10</u> Livestock pens	<u>14</u> Abandoned water well
<u>2</u> Sewer lines	<u>5</u> Cess pool	<u>8</u> Sewage lagoon	<u>11</u> Fuel storage	<u>15</u> Oil well/Gas well
<u>3</u> Watertight sewer lines	<u>6</u> Seepage pit	<u>9</u> Feedyard	<u>12</u> Fertilizer storage	<u>16</u> Other (specify below)
			<u>13</u> Insecticide storage	

Direction from well? west How many feet? 300

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	32	top			
32	36	sand stone			
36	39	sand			
39	48	sand stone			
48	49	rock			
49	54	sand			
54	95	clay			
95	108	sand			
108		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) 8-22-91 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 398 This Water Well Record was completed on (mo/day/yr) 8-22-91 under the business name of Kelley Drilling Co. by (signature) Richard O. Kelly

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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.