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

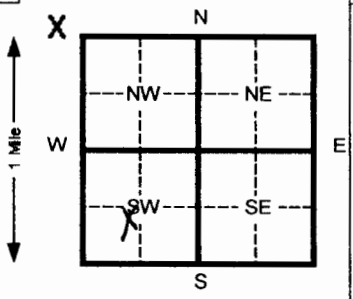
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: **Cheyenne**	NE ¼ SW ¼ SW ¼	**15**	T **4** S	R **41** E/W

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

2 WATER WELL OWNER: **Thad Douthit**
RR#, St. Address, Box # : **Jaqua Star Rt**
City, State, ZIP Code : **St. Francis, Ks 67756** **#2**

Board of Agriculture, Division of Water Resources Application Number:

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



4 DEPTH OF COMPLETED WELL **40'** ft. ELEVATION:

Depth(s) Groundwater Encountered 1 ____ ft. 2 ____ ft. 3 ____ ft.

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

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

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

Bore Hole Diameter **8** in. to **40** ft. and ____ in. to ____ ft.

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
[1] Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well

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: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued **X** Clamped
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded
[2] PVC 4 ABS 7 Fiberglass Threaded

Blank casing diameter **4.5** in. to **20** ft., Dia ____ in. to ____ ft., Dia ____ in. to ____ ft.

Casing height above land surface **18** in., weight **2.38** lbs./ft. Wall thickness or gauge No. **.248**

TYPE OF SCREEN OR PERFORATION MATERIAL: [7] PVC 10 Asbestos-cement
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped [8] Saw cut 11 None (open hole)
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)

SCREEN-PERFORATED INTERVALS: From **20** ft. to **40** ft. From ____ ft. to ____ ft.
From ____ ft. to ____ ft. From ____ ft. to ____ ft.

GRAVEL PACK INTERVALS: From **15** ft. to **40** 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 **0** ft. to **15** ft. From ____ ft. to ____ ft. From ____ ft. to ____ ft.

What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/ Gas well
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage **none**

Direction from well? How many feet?

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1		Surface			
1	6		Fine sand			
6	10		Fine to med sand w/clay			
10	19		Sandy clay			
19	23		Fine sand w/clay			
23	37		Med sand & gravel, loose			
37	40		shale			

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BUREAU OF WATER

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/yr) **7-26-04** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **554** This Water Well Record was completed on (mo/day/yr) **8-6-04** under the business name of **Woofter Pump & Well, Inc.** by (signature) Jay G Woofter

INSTRUCTIONS:. Please fill in blanks and circle the correct answers. Send 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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