WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No. _____

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: **Decatur**	**NW** ¼ **NE** ¼ **SW** ¼	**28**	T **5** S	R **29** E/(W)

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

2 WATER WELL OWNER: **Merlin Hussey**
RR#, St. Address, Box # : **3728 Smuser Ct**
City, State, ZIP Code : **Wichita, Ks 67202**

Board of Agriculture, Division of Water Resources
Application Number: **20080033**

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

N / NW / NE / W / X / E / SW / SE / S — 1 Mile

4 DEPTH OF COMPLETED WELL **60** ft. ELEVATION:
Depth(s) Groundwater Encountered 1 ____ ft. 2 ____ ft. 3 ____ ft.
WELL'S STATIC WATER LEVEL **NA** 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 **60** 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 ____ No **X**

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 **40** 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 **40** ft. to **60** ft. From ____ ft. to ____ ft.
From ____ ft. to ____ ft. From ____ ft. to ____ ft.
GRAVEL PACK INTERVALS: From **20** ft. to **60** 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 **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
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	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2		Surface			
2	7		Loess			
7	16		Clay			
16	55		Fine to med sand			
55	60		Yellow ochre & gray 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/yr) **1/17/08** 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) **1/25/08** under the business name of **Woofter Pump & Well Inc.** by (signature) Jay L Woofter By Susan A Woofter POA

INSTRUCTIONS:. Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

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