

WATER WELL RECORD Form WWC-5 KSA 82a-1212																											
1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number																						
County: <u>Rawlins</u>		<u>SE</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$	<u>16</u>	T <u>5</u> S	R <u>35</u> E <u>N</u>																						
Distance and direction from nearest town or city street address of well if located within city?																											
2 WATER WELL OWNER: <u>Charles G. & Naomi Nash</u>																											
RR#, St. Address, Box # : <u>208 Main</u>																											
City, State, ZIP Code : <u>Atwood, KS 67730</u>																											
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 <u>X</u> ft. ELEVATION:																									
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.																									
		WELL'S STATIC WATER LEVEL <u>Dry</u> 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 in. to ft., and in. to ft.																									
		WELL WATER TO BE USED AS:																									
		☒ Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) ☐ Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well																									
		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:																											
☒ Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) ☐ PVC 4 ABS 7 Fiberglass																											
Blank casing diameter <u>5</u> in. to <u>X Unknown</u> ft., Dia. in. to ft., Dia. in. to ft.																											
Casing height above land surface <u>8</u> in., weight lbs./ft. Wall thickness or gauge No.																											
TYPE OF SCREEN OR PERFORATION MATERIAL:																											
☒ Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) ☐ Brass 4 Galvanized steel 6 Concrete tile 9 ABS																											
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																											
SCREEN-PERFORATED INTERVALS:																											
From ft. to ft., From ft. to ft.																											
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft.																											
6 GROUT MATERIAL: ☒ Neat cement ☒ Cement grout 3 Bentonite 4 Other																											
Grout Intervals: From <u>X 10</u> ft. to <u>Surface</u> ft., From ft. to ft., From ft. to ft.																											
What is the nearest source of possible contamination: <u>X Nothing</u>																											
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? How many feet?																											
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td><u>80</u></td> <td><u>10</u></td> <td rowspan="3"><u>Well was cased in at 80 ft clay Surface Cement</u></td> </tr> <tr> <td></td> <td></td> <td></td> <td><u>10</u></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS				<u>80</u>	<u>10</u>	<u>Well was cased in at 80 ft clay Surface Cement</u>				<u>10</u>						
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or ☒ plugged under my jurisdiction and was completed on (mo/day/year) <u>X 11-1-88</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/yr) <u>X 11-1-88</u> by (signature) <u>Gordon Lowndes</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.