

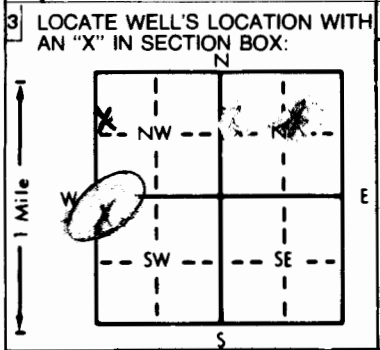
**WATER WELL RECORD Form WWC-5 KSA 82a-1212**

1 LOCATION OF WATER WELL: County: <u>OSBORNE</u>	Fraction SW 1/4 <input checked="" type="checkbox"/> NW 1/4 <input checked="" type="checkbox"/> NE 1/4 <input type="checkbox"/>	Section Number <u>19</u>	Township Number T <u>7</u> S	Range Number R <u>12</u> <del>E</del> W
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Distance and direction from nearest town or city street address of well if located within city?

107 ~~W~~ MERCURY OSBORNE

2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :	CLIFFORD HAHN 107 MERCURY OSBORNE KS 67473	Board of Agriculture, Division of Water Resources Application Number:
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4 DEPTH OF COMPLETED WELL: <u>60</u> ft. ELEVATION: .....	Depth(s) Groundwater Encountered <u>1</u> <u>42</u> ft. 2. .... ft. 3. .... ft. WELL'S STATIC WATER LEVEL <u>42</u> ft. below land surface measured on mo/day/yr <u>9-13-01</u> Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm Est. Yield <u>20</u> gpm: Well water was ..... ft. after ..... hours pumping ..... gpm Bore Hole Diameter <u>10</u> in. to <u>60</u> ft., and ..... in. to ..... ft. WELL WATER TO BE USED AS: 5 Public water supply    8 Air conditioning    11 Injection well 1 Domestic    3 Feedlot    6 Oil field water supply    9 Dewatering    12 Other (Specify below) 2 Irrigation    4 Industrial <input checked="" type="checkbox"/> Lawn and garden only    10 Monitoring well
Was a chemical/bacteriological sample submitted to Department? Yes.....No <input checked="" type="checkbox"/> ; If yes, mo/day/yr sample was submitted	
Water Well Disinfected? Yes ..... No <input checked="" type="checkbox"/>	

5 TYPE OF BLANK CASING USED: 1 Steel    3 RMP (SR) <input checked="" type="checkbox"/> PVC    4 ABS	5 Wrought iron    8 Concrete tile 6 Asbestos-Cement    9 Other (specify below) 7 Fiberglass	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped ..... Welded ..... Threaded .....
Blank casing diameter <u>5</u> in. to <u>40</u> ft. Dia	<u>18</u> in. to <u>160</u> lbs./ft. weight	<u>40</u> in. to ..... ft. Dia
Casing height above land surface		
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel    3 Stainless steel    5 Fiberglass    8 RMP (SR)    10 Asbestos-cement 2 Brass    4 Galvanized steel    6 Concrete tile    9 ABS    11 Other (specify) ..... 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) .....		
SCREEN-PERFORATED INTERVALS: From <u>40</u> ft. to <u>60</u> ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft.		
GRAVEL PACK INTERVALS: From <u>30</u> ft. to <u>60</u> ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft.		

6 GROUT MATERIAL: 1 Neat cement    2 Cement grout <input checked="" type="checkbox"/> Bentonite    4 Other .....	Grout Intervals: From <u>0</u> ft. to <u>30</u> 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
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Direction from well?		LITHOLOGIC LOG	How many feet?		PLUGGING INTERVALS
FROM	TO		FROM	TO	
0	3	SURFACE CLAY			
3	20	HARD GRAY CLAY			
20	30	WHITE ROCK & CLAY			
30	40	YELLOW LIMESTONE & CLAY			
40	52	HARD <del>BLUE</del> BLUE CLAY			
52	54	FINE SAND			
54	60	MED SAND			
60		BLUE SHALE			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>9-13-01</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>444</u> This Water Well Record was completed on (mo/day/yr) <u>9-14-01</u> under the business name of <u>ANDY ANDERSON DRILLING</u> by (signature) <i>Andy Anderson</i>
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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 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

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