

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

|  |   |                            |                                 |                               |
|--|---|----------------------------|---------------------------------|-------------------------------|
| LOCATION OF WATER WELL:<br>County: <u>MITCHELL</u> | Fraction<br><u>NE 1/4 SE 1/4 NE 1/4</u> | Section Number<br><u>9</u> | Township Number<br><u>T 7 S</u> | Range Number<br><u>R 7 EW</u> |
|--|---|----------------------------|---------------------------------|-------------------------------|

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

716 E. 3rd

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| WATER WELL OWNER: <u>MILTON RASDALL</u><br>R# , St. Address, Box # : <u>716 E. 3rd</u><br>City, State, ZIP Code : <u>BELOTT, KS. 67420</u> | Board of Agriculture, Division of Water Resources<br>Application Number: _____ |
|--|--|

|  |  |  |   |  |                                     |                                    |   |                                       |                                       |  |                                       |   |   |
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| LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:   | DEPTH OF COMPLETED WELL: <u>59.5</u> ft. ELEVATION: _____                                      |  |   |  |                                     |                                    |   |                                       |                                       |  |                                       |   |   |
|  | Depth(s) Groundwater Encountered 1. <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>8-3-91</u> |  |   |  |                                     |                                    |   |                                       |                                       |  |                                       |   |   |
|  | Pump test data: Well water was <u>44</u> ft. after <u>1</u> hours pumping <u>20</u> gpm        |  |   |  |                                     |                                    |   |                                       |                                       |  |                                       |   |   |
|  | Est. Yield <u>50+</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm        |  |   |  |                                     |                                    |   |                                       |                                       |  |                                       |   |   |
| Bore Hole Diameter: <u>9</u> in. to <u>59.5</u> ft., and _____ in. to _____ ft.  |  |  |   |  |                                     |                                    |   |                                       |                                       |  |                                       |   |   |
| WELL WATER TO BE USED AS:  |  |  |   |  |                                     |                                    |   |                                       |                                       |  |                                       |   |   |
| <table style="width:100%;"> <tr> <td><input type="checkbox"/> 5 Public water supply</td> <td><input type="checkbox"/> 8 Air conditioning</td> <td><input type="checkbox"/> 11 Injection well</td> </tr> <tr> <td><input type="checkbox"/> 1 Domestic</td> <td><input type="checkbox"/> 3 Feedlot</td> <td><input type="checkbox"/> 6 Oil field water supply</td> </tr> <tr> <td><input type="checkbox"/> 2 Irrigation</td> <td><input type="checkbox"/> 4 Industrial</td> <td><input type="checkbox"/> 7 <u>Lawn and garden only</u></td> </tr> <tr> <td><input type="checkbox"/> 9 Dewatering</td> <td><input type="checkbox"/> 10 Monitoring well</td> <td><input type="checkbox"/> 12 Other (Specify below)</td> </tr> </table> |  | <input type="checkbox"/> 5 Public water supply         | <input type="checkbox"/> 8 Air conditioning | <input type="checkbox"/> 11 Injection well | <input type="checkbox"/> 1 Domestic | <input type="checkbox"/> 3 Feedlot | <input type="checkbox"/> 6 Oil field water supply | <input type="checkbox"/> 2 Irrigation | <input type="checkbox"/> 4 Industrial | <input type="checkbox"/> 7 <u>Lawn and garden only</u> | <input type="checkbox"/> 9 Dewatering | <input type="checkbox"/> 10 Monitoring well | <input type="checkbox"/> 12 Other (Specify below) |
| <input type="checkbox"/> 5 Public water supply   | <input type="checkbox"/> 8 Air conditioning  | <input type="checkbox"/> 11 Injection well             |   |  |                                     |                                    |   |                                       |                                       |  |                                       |   |   |
| <input type="checkbox"/> 1 Domestic  | <input type="checkbox"/> 3 Feedlot   | <input type="checkbox"/> 6 Oil field water supply      |   |  |                                     |                                    |   |                                       |                                       |  |                                       |   |   |
| <input type="checkbox"/> 2 Irrigation  | <input type="checkbox"/> 4 Industrial  | <input type="checkbox"/> 7 <u>Lawn and garden only</u> |   |  |                                     |                                    |   |                                       |                                       |  |                                       |   |   |
| <input type="checkbox"/> 9 Dewatering  | <input type="checkbox"/> 10 Monitoring well  | <input type="checkbox"/> 12 Other (Specify below)      |   |  |                                     |                                    |   |                                       |                                       |  |                                       |   |   |
| 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 <input checked="" type="checkbox"/> No _____   |  |  |   |  |                                     |                                    |   |                                       |                                       |  |                                       |   |   |

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| TYPE OF BLANK CASING USED:  | 5 Wrought iron      8 Concrete tile<br>1 Steel      3 RMP (SR)<br>2 PVC      4 ABS<br>6 Asbestos-Cement      9 Other (specify below) | CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____<br>Welded _____<br>Threaded _____ |
| Blank casing diameter <u>5</u> in. to <u>49</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. | Casing height above land surface <u>18</u> in., weight <u>160</u> lbs./ft. Wall thickness or gauge No. <u>SDR 26</u>                 |  |

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| TYPE OF SCREEN OR PERFORATION MATERIAL: | 7 PVC<br>1 Steel      3 Stainless steel      5 Fiberglass      8 RMP (SR)<br>2 Brass      4 Galvanized steel      6 Concrete tile      9 ABS<br>10 Asbestos-cement<br>11 Other (specify) _____<br>12 None used (open hole) |  |
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| SCREEN OR PERFORATION OPENINGS ARE: | 5 Gauzed wrapped      8 Saw cut      11 None (open hole)<br>1 Continuous slot      3 Mill slot <u>.030</u> 6 Wire wrapped      9 Drilled holes<br>2 Louvered shutter      4 Key punched      7 Torch cut      10 Other (specify) _____ |  |
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| SCREEN-PERFORATED INTERVALS: | From <u>49</u> ft. to <u>59</u> ft., From _____ ft. to _____ ft. | From _____ ft. to _____ ft., From _____ ft. to _____ ft. |
| GRAVEL PACK INTERVALS:       | From <u>21</u> ft. to <u>59</u> ft., From _____ ft. to _____ ft. | From _____ ft. to _____ ft., From _____ ft. to _____ ft. |

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| GROUT MATERIAL: | 1 Neat cement      2 Cement grout      3 <u>Bentonite</u> 4 Other _____<br>Grout Intervals: From <u>1</u> ft. to <u>21</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. |  |
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| What is the nearest source of possible contamination: | 10 Livestock pens      14 Abandoned water well<br>1 Septic tank      4 Lateral lines      7 Pit privy      11 Fuel storage      15 Oil well/Gas well<br>2 Sewer lines      5 Cess pool      8 Sewage lagoon      12 Fertilizer storage      16 Other (specify below)<br>3 Watertight sewer lines      6 Seepage pit      9 Feedyard      13 Insecticide storage |
| Direction from well? <u>EAST</u>                      | How many feet? <u>45</u>  |

| FROM | TO   | LITHOLOGIC LOG           | FROM | TO | PLUGGING INTERVALS |
|------|------|--------------------------|------|----|--------------------|
| 0    | 3    | TOP SOIL                 |      |    |                    |
| 3    | 41   | SANDY LOOM w/CLAY LAYERS |      |    |                    |
| 41   | 50   | SAND FINE                |      |    |                    |
| 50   | 59.5 | MED. SAND & SMALL GRAVEL |      |    |                    |
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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) 8-3-91 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 388 This Water Well Record was completed on (mo/day/yr) 8-3-91 under the business name of PESTINGER PUMP SERVICE by (signature) [Signature]

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.