

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

1 LOCATION OF WATER WELL: County: GRAHAM Fraction: NE 1/4 SW 1/4 NE 1/4 Section Number: 23 Township Number: T 8 S Range Number: R 22 E/W

Distance and direction from nearest town or city street address of well if located within city?
2 1/2 miles West and 1 mile South of ~~BOGUE~~ BOGUE KS

2 WATER WELL OWNER: BRAD KEITH
RR#, St. Address, Box #: 622 N 8th Board of Agriculture, Division of Water Resources
City, State, ZIP Code: HILL CITY KS 67642 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: [Diagram showing a 2x2 grid with NW, NE, SW, SE quadrants. An 'X' is marked in the NE quadrant. A vertical scale bar on the left indicates 1 mile. The grid is labeled with N, S, E, W directions.]

4 DEPTH OF COMPLETED WELL: 30 ft. ELEVATION: _____ ft.
Depth(s) Groundwater Encountered 1. 20 ft. 2. _____ ft. 3. _____ ft.
WELL'S STATIC WATER LEVEL 20 ft. below land surface measured on mo/day/yr 9-28-98
Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
Est. Yield 30 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
Bore Hole Diameter 10 in. to 30 ft. and _____ in. to _____ ft.
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
XX Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well _____
Was a chemical/bacteriological sample submitted to Department? Yes _____ No XX If yes, mo/day/yr sample was submitted _____
Water Well Disinfected? Yes _____ No XX

5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued XX Clamped _____
XX PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
7 Fiberglass Threaded _____
Blank casing diameter 5 in. to 20 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
Casing height above land surface 18 in., weight 160 lbs./ft. Wall thickness or gauge No. _____
TYPE OF SCREEN OR PERFORATION MATERIAL: XX 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 XX 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 30 ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From 20 ft. to 30 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout XX Bentonite 4 Other _____
Grout Intervals: From 0 ft. to 20 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 _____
Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	SURFACE CLAY			
5	15	FINE SAND			
15	30	MED SAND			
30	31	BLUE SHALE			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was XX constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 9-28-98 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 444 This Water Well Record was completed on (mo/day/yr) 9-28-98 under the business name of ANDY ANDERSON DRILLING by (signature) Andy Anderson

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.

OFFICE USE ONLY
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