

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

LOCATION OF WATER WELL: County: <b>Sheridan</b>	Fraction <b>SW 1/4 SE 1/4 NW 1/4</b>	Section Number <b>31</b>	Township Number <b>T 8 S</b>	Range Number <b>R 27W EW</b>
--	---	-----------------------------	---------------------------------	---------------------------------

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

**2 1/2 E, 2 1/2 S of Hoxie, Kansas**

WATER WELL OWNER: <b>Charles Morton</b>	Red Tiger	Morton No. <b>1</b>
RR#, St. Address, Box # : <b>Hoxie, Ks. 67740</b>	1720 Ks. St. Bank Bldg. Board of Agriculture, Division of Water Resources	
City, State, ZIP Code :	<b>Wichita, Ks. 67202</b>	Application Number: <b>T83-559</b>

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	DEPTH OF COMPLETED WELL: <b>87</b> ft.	ELEVATION: <b>Unknown</b>
	Depth(s) Groundwater Encountered 1. <b>20</b> ft. 2. .... ft. 3. .... ft.	
	WELL'S STATIC WATER LEVEL ..... <b>20</b> ft. below land surface measured on mo/day/yr ..... <b>10/26/83</b>	
	Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm	
	Est. Yield ... <b>60</b> ... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm	
	Bore Hole Diameter ... <b>8</b> ... in. to <b>8 7/8</b> ... 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 <u>Oil field water supply</u> 9 Dewatering 12 Other (Specify below)		
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well		
Was a chemical/bacteriological sample submitted to Department? Yes..... <u>No</u> .....; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes <u>No</u>		

TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: <u>Glued</u> Clamped
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
<u>2 PVC</u>	4 ABS	7 Fiberglass	Welded
Blank casing diameter ..... <b>5</b> ..... in. to <b>6 7/8</b> ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.	Casing height above land surface ..... <b>12</b> ..... in., weight ..... lbs./ft. Wall thickness or gauge No. <b>Sch. 40</b>		
TYPE OF SCREEN OR PERFORATION MATERIAL:			
1 Steel 3 Stainless steel 5 Fiberglass 7 <u>PVC</u> 10 Asbestos-cement			
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) .....			
SCREEN OR PERFORATION OPENINGS ARE:			
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 <u>Saw cut</u> 11 None (open hole)			
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes			
3 Screen-perforated intervals: From ..... <b>67</b> ..... ft. to <b>87</b> ..... ft., From ..... ft. to ..... ft.			
GRAVEL PACK INTERVALS: From ..... <b>10</b> ..... ft. to <b>87</b> ..... ft., From ..... ft. to ..... ft.			

GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 <u>Bentonite</u>	4 Other
GROUT INTERVALS: From ..... <b>0</b> ..... ft. to <b>10</b> ..... 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 <u>Oil well/Gas well</u>				
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)				
13 Insecticide storage				
Direction from well? <b>East</b>	How many feet? <b>60</b>			

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	72	Clay			
72	82	Sand and Gravel			
82	87	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/year) ... **10/26/83** ..... 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) ..... **12/6/83** under the business name of **Kellys Water Well 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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.