|                                |                      |                            | WELL RECORD                    | Form WWC-5     |                       |  |                            |                                      |
|--------------------------------|----------------------|----------------------------|--------------------------------|----------------|-----------------------|--|----------------------------|--------------------------------------|
| LOCATION OF WATCOUNTY: Leave   | rer well:<br>nworth  | Fraction SE 1/4            | NE 1/4                         | SE 1/4 Sec     | tion Number<br>24     | Township Nu  | mber<br>S                  | Range Number                         |
| Distance and direction Neeley, | from nearest town of |                            |                                |                |                       |  |                            | , n -                                |
| WATER WELL OW                  |                      | Thompso                    | n                              |                |                       |  |                            |                                      |
| RR#, St. Address, Bo           |                      | Rd. 30                     | 1.1                            |                |                       | Board of Ag  | griculture, [              | Division of Water Resource           |
| City, State, ZIP Code          |                      |                            | Kansas                         |                |                       | Application  | Number:                    |                                      |
| LOCATE WELL'S L                | OCATION WITHIA       | DEPTH OF CO                | MPLETED WELL.                  | 58             | . ft. ELEVA           | ATION:   |                            |                                      |
| AN "X" IN SECTION              | N BOX: De            | epth(s) Groundw            | ater Encountered               | 1 <b>.19</b>   | ft.                   | 2  | ft. 3                      | <u></u>                              |
| ī !                            | . WI                 |                            |                                |                |                       |  |                            | 10-3-83                              |
| NW                             | NE                   |                            |                                |                |                       |  |                            | mping gpm                            |
| 1   1                          |                      |                            |                                |                |                       |  |                            | mping gpn                            |
| A iie                          |                      |                            |                                |                |                       |  |                            | toft                                 |
| -                              |                      |                            | BE USED AS:                    |                |                       | 8 Air conditioning   |                            | Injection well Other (Specify below) |
| SW                             | SEX -                | 1 Domestic<br>2 Irrigation | 3 Feedlot 4 Industrial         |                |                       | <ul><li>9 Dewatering</li><li>10 Observation well</li></ul> |                            |                                      |
| 1 1 1                          |                      | •                          |                                |                | -                     |  |                            | mo/day/yr sample was su              |
| !                              |                      | tted                       | otoriological campio           |                |                       | ater Well Disinfected                                      | ? Yes                      | XX No                                |
| TYPE OF BLANK                  | CASING USED:         |                            | 5 Wrought iron                 | 8 Concr        |                       | CASING JOIN  | NTS: Glued                 | XX                                   |
| 1 Steel                        | 3 RMP (SR)           |                            | 6 Asbestos-Cement              |                | (specify belo         | w)   | Weld                       | ed                                   |
| 2 PVC                          | 4 ABS                |                            | 7 Fiberglass                   |                |                       |  |                            | ided                                 |
| Blank casing diameter          |                      | to 58!                     | ft., Dia                       | in. to         |                       | ft., Dia   |                            | in. to ft                            |
|                                |                      |                            | n., weight                     |                |                       |  |                            | 265                                  |
| TYPE OF SCREEN O               |                      |                            |                                | 7 PV           |                       |  | estos-ceme                 |                                      |
| 1 Steel<br>2 Brass             | 3 Stainless st       |                            | 5 Fiberglass                   | 8 HN<br>9 AE   | MP (SR)               |  | er (specity)<br>e used (op | on hole)                             |
| SCREEN OR PERFOI               | 4 Galvanized         |                            | 6 Concrete tile                | zed wrapped    |                       | 8 Saw cut  | s used (op                 | 11 None (open hole)                  |
| 1 Continuous slo               |                      |                            |                                | wrapped        | •                     | 9 Drilled holes  |                            | TT None (open note)                  |
| 2 Louvered shut                |                      | ounched                    | 7 Toro                         | h cut          |                       | 10 Other (specify)   |                            |                                      |
| SCREEN-PERFORATI               |                      | From                       | O ft. to .                     | 58             | ft., Fro              | om   | ft. t                      | o                                    |
|                                |                      |                            |                                |                |                       |  |                            | o                                    |
| GRAVEL PA                      | CK INTERVALS:        | From                       |                                |                |                       | om   |                            |                                      |
| 1                              |                      | From                       |                                |                |                       |  |                            | o ft                                 |
| GROUT MATERIAL                 |                      |                            | •                              | 3 Bento        |                       |  |                            |                                      |
| What is the nearest so         | •                    |                            | π., From                       | π.             |                       |  |                            | ft. toft<br>bandoned water well      |
|                                | •                    |                            | 7 Pit privy                    |                |                       | storage  |                            |                                      |
| 2 Sewer lines                  |                      |                            | 7 Pit privy<br>8 Sewage lagoon |                | 12 Fertilizer storage |  |                            | ther (specify below)                 |
| 3 Watertight sew               | er lines 6 Seepage   |                            | 9 Feedyard                     | 9              |                       | cticide storage  |                            |                                      |
| Direction from well?           | NW                   | ·                          | •                              |                | How ma                | any feet?  | 75                         | ft.                                  |
| FROM TO                        |                      | LITHOLOGIC L               | OG                             | FROM           | TO                    |  | LITHOLOG                   | IC LOG                               |
| 0 2                            | Top Soil             |                            |                                |                |                       |  |                            |                                      |
| 2 190/                         |                      |                            |                                |                |                       |  |                            |                                      |
|                                | Silt                 |                            |                                |                |                       |  |                            |                                      |
| 48 58/7                        | Sand & Gr            | avel                       |                                |                |                       |  |                            |                                      |
|                                |                      |                            |                                |                |                       |  |                            |                                      |
|                                |                      |                            |                                |                |                       |  |                            |                                      |
|                                |                      |                            |                                |                |                       |  | -                          |                                      |
|                                |                      |                            |                                |                |                       |  |                            |                                      |
|                                |                      |                            |                                |                |                       |  |                            |                                      |
|                                |                      |                            |                                |                |                       |  |                            |                                      |
|                                |                      |                            |                                |                |                       |  |                            |                                      |
|                                |                      |                            |                                |                |                       |  |                            |                                      |
|                                |                      |                            |                                |                |                       |  |                            |                                      |
| T                              |                      |                            |                                |                |                       |  |                            | <u> </u>                             |
|                                |                      |                            |                                |                |                       |  |                            | ler my jurisdiction and wa           |
| completed on (mo/day           |                      |                            |                                |                |                       |  |                            | owledge and belief. Kansa            |
| Water Well Contractor          |                      |                            |                                | Well Record wa | •                     |  | ·10 <b>-/</b>              | -93                                  |
| under the business na          |                      | UER, INC                   |                                | nd PRINT class |                       | in blank underline   | or circle                  | correct answers. Send to             |
| three copies to Kansas         | Department of Healt  |                            |                                |                |                       |  |                            | Send one to WATER WEL                |
| OWNER and retain or            | ne for your records. |                            |                                |                |                       | , -F,  |                            |                                      |