WATE	R WELI	RECORD	Form WWC	-5	Division of Water Resources; App. No.			
1 LOC	'ATION C	F WATER WELL:	Fraction SE NE	A/W/A/W	Section Number	Township Number	Range Number	
Coun	ity: DIC	KINSON	1952 1/4 plat 1/4 p	1/4	24 23	T // S	R Z EW	
County: DICKINSON Distance and direction from nearest town or city street address of well if located within city? FROM MANUAL STEP: 8.5 MILES Global Positioning Systems (decimal degrees, min. of 4 digits Latitude: 39 5.339								
located within city? FROM Early Prints					Latitude: 39 5, 339 Longitude: 97 10,926			
2 WA	TER WEI	LOWNER: GARY BEA	CAMEIER		Elevation:	7/ /0.72		
RR#	, St. Addre	ess, Box # : ///8 3406 /	AVF_		Datum:			
City, State, ZIP Code : ABILENR, KS 67410 Data Collection Method:								
3 LOC	ATE WE	LL'S 4 DEPTH OF COMP	LETED WELL	235	Eft.	victiou.		
LOCATION								
WITH AN "X" IN Depth(s) Groundwater Encountered (1)								
SEC'	SECTION BOX: WELL'S STATIC WATER LEVEL							
	Pump test data: Well water was							
	Est. Yield. 2.0gpm: Well water was							
	1 NW NE 1 D							
E 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering (2 Driner (Specify below)) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well GEOTHEMPH								
SV	Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs							
	Sample was submitted Water well disinfected? Yes No							
S s								
5 TYPI	E OF CAS	ING USED: 5 Wrought I	ron 8 Con	crete tile	CASING	JOINTS: Glued	Clamped	
1	Steel	3 RMP (SR) 6 Asbestos-	Cement 9 Othe	r (specify	below)	Welded	K	
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued								
Blank casing diameter								
Casing neight asers land surface								
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)								
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)								
SCREEN OR PERFORATION OPENINGS ARE:								
1 Continuous slot 3 Mill slot 5 Guazed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)								
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)								
SCREEN-PERFORATED INTERVALS: From								
From ft. to ft., From ft. to ft.								
GRAVEL PACK INTERVALS: From								
From								
6 GRO	UT MATI	ERIAL: 1 Neat cement 2 (Cement grout 3 Be	ntonite	4 Other			
Grout Intervals: From								
What is the nearest source of possible contamination:								
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 6 Other (specify								
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below)								
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well								
FROM	TO	LITHOLOGIC		FROM		PLUGGING INTI		
O	4	SOIL	LOG	TROM	10	12000110 1111	ERVILLS	
4	33	LIMY SHALE TAN	1 400076	1				
98	133	SHALE BULL COLA	V to RED			10LE TO 72	4	
133	145	LIMPSOME TANK	MY		1 / //	ULETO 23	\$	
145	198	SHALE BLUE, LOK	MY		1 7 7			
198	207	CHSUM	. /					
207	235	SHALE GRAY						
		7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -						
g cothernal								
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This well was (1) constructed, (2) reconstructed, or (3) plugged								
under my jurisdiction and was completed on (mo/day/year)								
under the business name of ASSOCIATED OF DUTY 6 LW (, by (signature)								
INSTRICTIONS: Use typewriter or half 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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone								
785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at								
http://www.kdhe.state.ks.us/geo/waterwells.								

KSA 82a-1212