| | | WA | TER WELL REC | ORD Form | n WWC-5 | KSA 82a-1 | 1212 ID I | NoI | I-52 | | | | | |
|--|------------|-----------------------|--------------------------|---|---|-----------------------|---|----------------|----------------------------|---------------------------|---|-----------|--------------------|--|
| 1 LOCATION OF WATER WELL: County: Wyan dotte | | | Fraction NW 1/4 | NW 1/4 | NW 14 | Sec | tion Number | | nship Nur | | | ge Num | er (E) W | |
| | | | wn or city street a | | | ithin city? | <u>کا</u> | <u> </u> T | Щ_ | S | R | 25 | (E)W | |
| | | | • | | | | | | | | | | | |
| | WELL OW | NER: Colga | te Palmoli | ve comp | any | | | | | | | | | |
| RR#, St. Add City, State, Z | | | Kansas Ave as City, K | r | | | | | ard of Agri olication N | | ivision of V | Vater Re | sources | |
| | | CATION WITH | 4 DEPTH OF C | OMPLETED V | VELL | 43 | ft. ELEV | ATION: | | | | | | |
| AN "X" IN | | | Depth(s) Grour | ndwater Encou | ntered 1 | | i | | | | | | | |
| | 1 | i | WELL'S STATI | mp test data: | Well water | was | ft. | after | | hours pi | umping | | gpm | |
| | w | - NE | Est. Yield WELL WATER | | | | ft. supply | | | | imping jection wel | | gpm | |
| | 1 | 1 | 1 Domestic | 3 Feedlo | t 60 | il field water | supply | 9 Dewate | ering | 12 0 | ther (Spec | ify belov | | |
| w — | 1 | E | 2 Irrigation | 4 Industr | iai / D | omestic (law | n & garden) | 10 Monito | ring weii | | | ••••• | | |
| : | sw | - SE | Was a chemica | al/bacteriologic | al sample sı | ıbmitted to [| Department? | Yes N | o | ; If yes, m | o/day/yrs s | sample v | vas sub- | |
| | ! | ! | mitted | | cteriological sample submitted to Department? Yes No; If yes, mo/day/yrs sample was sul Water Well Disinfected? Yes No | | | | | | | | | |
| T/DE 05 | S | 10000 | | = 11/ | | | | 040 | 110 1011 | ITO: Oliver | | | | |
| 5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) | | | | 5 Wrought in 6 Asbestos-6 | | 8 Concre 9 Other (| w) | | | d | • | | | |
| 2 PVC | | 4 ABS | in. to | 7 Fiberglass | | | CPVC | | | Threa | adéd) | | | |
| | | | in. to | | | | | | II thicknes | s or quaq | e No | | | |
| | | RPERFORATIO | | 7 PV | C | | 10 Asbe | stos-Cem | ent co | 10 | | | | |
| 1 Steel 3 Stainless Steel 2 Brass 4 Galvanized Steel | | | | 5 Fiberglass6 Concrete t | | | 8 RMP (SR) 9 ABS | | | r (Specify) e used (op | , | | | |
| | | RATION OPENI | | | 5 Guaze | d wrapped | | 8 Saw | cut | | 11 None | (open h | ole) | |
| | nuous slot | | Mill slot | rapped | | 9 Drille | | | | | ft. | | | |
| | PRECIDENTE | r 4 K ED INTERVALS | tey punched : From | 43 | 7 Torch of | | ft., Fror | | | | | | | |
| | | | From | | ft. to | | ft., Fror | n | | ft. to | | | ft. | |
| GI | RAVEL PAG | CK INTERVALS | | .43 | | | | | | | | | | |
| 6 GROUT | MATERIA | I · 1 Nea | t cement | 2 Cament | grout | 3 Bent | onite | 4 Other | | | | | | |
| GROUT MATERIAL: 1 Neat cement 2 Cement grout Grout Intervals: Fromft., From | | | | | | | ft. to ft., From | | | | | | | |
| | | • | contamination: | | | 10 Livestock pens | | | | 14 Abandoned water well | | | | |
| 1 Seption 2 Sewe | | 4 Late 5 Cess | ral lines | 7 Pit privy 8 Sewage lagoon | | | 11 Fuel storage12 Fertilizer storage | | | | 15 Oil well/Gas well 16 Other (specify below) | | | |
| | | r lines 6 Seep | • | 9 Feedyard | | | 13 Insecticide storage | | | | | | | |
| Direction from | | | | | | | | any feet? | | | | | | |
| FROM O | | | | CLOG | | FROM | то | | PLUGGING INTERVALS | | | | | |
| 5 | 30 | Fill Silty cla | У | | | | | | | | | | | |
| 30 | 35 | Sil+ + | race fine : | | | | | | | | | | | |
| 35 | 43 | Fine say | d poorly | sorted | | | <u> </u> | | | | | | | |
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| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| CONTRA | CTOR'S C | R LANDOWNE | R'S CERTIFICA | TION: This wa | iter well was | (1 constru | ucted (2) red | constructed, | or (3) plu | ugged und | der my juri | sdiction | and was | |
| completed on | mo/day/y | ear) | 129/07 529 | | This Mater | Voll Passed | and this r | record is true | to the be | st of my kr | nowledge a | nd belie | . Kansas | |
| under the bus | | | | IN POW | | veli necola | was complet by | (signature) | ay/yi) | SILL | | | | |

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, 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.