| WA | TER WELL REC | CORD | Form WWC- | 5 | Division | n of Water | Resources; App. No. | L | |
|---|--|---|---|-----------------------|---------------------|-------------------------|--|---------------------------|--|
| 1 | LOCATION OF WA | TER WELL: | Fraction | | Section N | umber | Township Number | | |
| | County: Dickinso | n | 3 w 1/4 NW 1/45 | الم | 4 | | T 13 S | R 2 E/W* | |
| | Distance and direction from nearest town or city street address of well if | | | | | | | | |
| | • | & South 1 ble | | - 1 | 5Latitude: | | | | |
| | WATER WELL OW | | | Longiiuu Elevetier | .e: | | | | |
| | RR#, St. Address, Box | | | | Elevation Datum: | 1 | | | |
| | City, State, ZIP Code | | | | | lastion N | Asthad. | | |
| 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL1.28. | | | | | | Data Collection Method: | | | |
| | LOCATE WELL S LOCATION | 4 DEFINOR COM | LETED WELL | .J.4H | ••••• | 11. | | | |
| | WITH AN "X" IN | Depth(s) Groundwater | Encountered (1) | 108 | ft. | (2) | ft. (3). | ft. | |
| | SECTION BOX: | | Encountered (1)10.8 ft. (2) ft. (3) ft. FER LEVEL1.0.3 ft. below land surface measured on mo/day/yr.8/3.1/06 | | | | | | |
| | N | Well water wasft. after hours pumping gpm | | | | | | | |
| [| Est. Yield | | | | | | | gpm | |
| | NW NE | E USED AS: 5 Publi | | | | | | | |
| w | E | 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) | | | | | | | |
| | | 2 Irrigation 4 Ind | strial 7 Domestic (lawn & garden) 10 Monitoring well | | | | | | |
| | SW *SE | Was a shamical/hastonial scient commits out mitted to Department? Was | | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes No*; If Sample was submitted | | | | | | | | | |
| Sample was submitted | | | | | | | | • • • • • | |
| 5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued* Clamped | | | | | | | | | |
| 5 I | 1 Steel 3 RMF | SED: 5 Wrought 1 | | rete tile (specify) | | CASING | | Clamped | |
| | | | | | | | | | |
| Rla | nk casing diameter | 5 in to 128 | ft Diameter | i1 | . to | fr | Diameter | in to ft | |
| 2 PVC 4 ABS 7 Fiberglass Threaded Blank casing diameter | | | | | | | | | |
| | | PERFORATION MATE | | 2.0.0 | .001/ 101 | ,, 411 1111 | or gaage i to. | | |
| 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) | | | | | | | | | |
| 2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) | | | | | | | | | |
| 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 | | | | | | | | | |
| GRAVEL PACK INTERVALS: From24 | | | | | | | | | |
| | | rioni | | | 11., | 110111 | | 11. | |
| 6 (| GROUT MATERIAL | : 1 Neat cement 2 (| Cement grout 3 Ber | tonite | 4 Other | | | | |
| | | m2 ft. to | | | ft. to | ft | ., From | ft. toft. | |
| What is the nearest source of possible contamination: | | | | | | | | | |
| | 1 Septic tank | 4 Lateral lines | | 0 Livesto | | | ecticide Storage | 16 Other (specify | |
| 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below) | | | | | | | | | |
| Di- | 3 Watertight sewer | lines 6 Seepage pit .NORTHEAST | | | er Storage | | well/gas well | •••• | |
| | OM TO | LITHOLOGIC | | FROM | TO | Q.Q.,, | PŁUGGING IM | | |
| (| | N CLAY | LOG | 62 | | T.TMP | COLOR SHALE | | |
| | | COLOR CLAY & | CHALE | | | | COLOR LIMES | | |
| | | GRAY SHALE & | | 70 75 | | | GRAY SHALE | TONE | |
| | | COLOR SHALE | СПАТ | 93 | | | | | |
| | | ON SHALE & CLA | ΛY | 106 | | | GRAY SHALE | | |
| | | GRAY MAROON C | | 108 | | | COLOR LIMES | TONE | |
| | | COLOR SHALE & | | 121 | | | SHALE | TONE | |
| | | COLOR GRAY & | | 122 | | | GRAY LIMEST | ONE | |
| | | ON SHALE | | 1 2.2. | | | <u> </u> | | |
| | | COLOR 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 8 8/3.1/ Qa6d this record is true to the best of my knowledge and belief. | | | | | | | | | |
| Kansas Water Well Contractor's License No39.7 This Water Well Record was completed on (mo/day/year0.9/12/06 | | | | | | | | | |
| und | er the business name of | of CENTRAL KANS | SAS DRILLING | by | (signatur | e) 7/a | weld D. me | eitin | |
| INS | TRUCTIONS: Use typewi | riter or ball point pen. PLEA. ent of Health and Environmen | SE PRESS FIRMLY and P. | RINT clearl | y. Please fil | ll in blanks | underline or circle the cuite 420. Topoka Kansar | correct answers. Send top | |
| | | to WATER WELL OWN | | | | | | | |

http://www.kdhe.state.ks.us/geo/waterwells.