WATER WELL RECORD	Form WWC-5				es; App. No.		
1 LOCATION OF WATER WELL: County: Dickinson	CYNT CYNT I	DE V	0		т 13	S	Range Number R 2 E
Distance and direction from nearest town	or city street address of v	vell if GI	obal Positi	oning S	ystem (decim	nal degr	ees, min. of 4 digits)
located within city? 2205 N. Buckeye, A	bilene KS	1 1.	annae:	11 20.72	133		
	<u> </u>	Longitude: W 97.21358° Elevation: RIM: 1221.36; TOC: 1220.89					
2 WATER WELL OWNER: Betty Leah Swinney			Datum: NAD83				
RR#, St. Address, Box # : 2203]	N. Buckeye	T	Datum. Data Collect	tion Met	hod: legal s	urvev	
City, State, ZIP Code : Abiler	E COMPLETED WELL		Jam Conco.	1011 11100	ft.		
LOCATON WELL'S 4 DEFIN OF CONTINETED WELL'S MW1R							
LOCATON WITH AN "Y" IN Donth(a) Grove	indurater Encountered 1		1	ft. 2		ft. 3	ft.
WITH AN "X" IN Depth(s) Grou	andwater Encountered 1 ATIC WATER LEVEL	3 30 ft	below land	surface	measured or	n mo/d	ay/yr 9/23/11
SECTION BOX: WELL'S STA	np test data: Well water v	790	ft af	fter	hours	pumpi	ng gpm
N Pun	gpm: Well water v	796	ft af	fter	hours	pumpi	ng gpm
	gpm. Wen water v	vas Jublic svat	er sunnly	8 Air c	onditioning	11 Ir	niection well
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)							
W 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well							
	4 Industrial / Domestic (iawii & g	articii) (10) IVIOIIII	ing won		
SW SE Vy 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs Sample was submitted Water Well Disinfected? Yes No X							
S Sample was s	ubmitted		VV C	ater Wer	1 Distinctice	1. 105	C1 1
5 TYPE OF CASING USED:	Wrought Iron 8	Concret	e tile	CASIN	IG JOINTS:	Glued	Clamped
2)PVC 4 ABS	7 Fiberglass					Threa	ded X
Blank casing diameter 2 in. to	18 ft., Dia	i	n. to	ft., I	Dia	in.	to ft.
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welder 2 PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 18 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.47 ft., Weight Ibs./ft. Wall thickness or gauge No.							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel 3 Stainless steel 5 Fiberglass (7) PVC 9 ABS 11 Other (specify)							
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass (7) PVC 9 ABS 11 Other (specify) 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)							
1 Continuous slot 3 Mill slot 5 Gauze 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)							
learners reproduce the first transfer of the second							
Littorn II II C II C III II II II II II II II I							
GRAVEL PACK INTERVALS: From 16 ft. to 38 ft. From ft. to ft.							
GRAVEL PACK INTERVALS.	From	ft to		ft. From	n	ft.	to ft.
From ft. to ft. From ft. to ft.							
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-1ft Grout Intervals From 1 ft. to 16 ft. From ft. to ft. From ft. to ft.							
Grout Intervals From 1 ft. to 16 ft. From ft. to tt. From ft. to ft. From ft. to ft. From ft.							
What is the nearest source of possible contamination:							
1 Septic tank 4 Lateral mics / 1 it privy							
2 Sewer lines 3 Cess poor 8 Sewage lagoon 191 der sterage							
3 Watertight sewer lines 6 Seepage pit 9 Feedyard Direction from well? Within the basin 12 Fertilizer storage 15 Oil well/ gas well How many feet? Within the basin							
Direction from well? Within the basi				thin the			TTT T A T C
FROM TO LITH	OLOGIC LOG	FROM	TO		PLUGGIN	1G IN I	EKVALS
0 1 Topsoil with gravel							
1 10 Brown fill sand		<u></u>					
10 12 Silty clay							
12 17 Brown to green clay		-	_				
17 38 Fine to coarse gray to	to orange brown sand	1	+				
		1					
				Flushm	ount waiver	r from	BOW
				_			1 (2) 1
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Denstructed, (2) reconstructed, or (3) plugged							
under my jurisdiction and was completed on (mo/day/year) 9/22-23/11 and this record is trace that only however and benefit							
Kansas Water Well Contractor's License No. 757 . This Water Well Record was completed on mo/dayyear 10/28/11							
under the business name of Larsen & Associates, Inc. by (signature)							
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Hearth 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							
INSTRUCTIONS: Please fill in blanks or circl	e the correct answers. Send top '	Telephone	785-296-5522	. Send on	To WATER W	VELL O'	WNER and retain one for

CORRECTED