| WATEI | R WELL I | RECORI |) | Form WWC | -5 | Division of Wa | ter Resources; App. No. | |
|---|----------------------------|--|--------------------------------|------------------------|------------|--------------------------|--|--------------------------|
| | ATION OF | 1.4 | WELL: | Fraction NW/4 / | | Section Number | | |
| Dista | ty: Di C | tion from r | pearest town or ci | ty street address of w | ell if | <u> </u> | ng Systems (decimal de | |
| Distance and direction from nearest town or city street address of well if located within city? | | | | | | Latitude: | | |
| 2N Herringten | | | | | | Longitude: | | |
| 2 WATER WELL OWNER! Rodger Will | | | | | | Elevation: | | |
| RR# | St. Address | , Box # : | 19783 | 40 th St. | | Datum: | | |
| 2 WATER WELL OWNER: Rodger Will Elevation: RR#, St. Address, Box # : 197 & 340 th St. City, State, ZIP Code : 197 & 340 th St. City, State, ZIP Code : 197 & 340 th St. City State, ZIP Code : 197 & 340 th St. City State, ZIP Code : 197 & 340 th St. City State, ZIP Code : 197 & 340 th St. That Collection Method: 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL | | | | | | | | |
| 3 LOC | ATE WELL | L'S 4 DE | PÝTH ŐF COMI | PLETEDWELL | | f | t. | |
| LOC | ATION | l l | | | | | | |
| WITH AN "X" IN Depth(s) Groundwater Encountered (1) | | | | | | | | 3-14-10 |
| SEC | ΓΙΟΝ BOX: N | WEL | WELL'S STATIC WATER LEVEL | | | | | |
| | | Fet | | | | | | |
| | ' | WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well | | | | | | |
| WELL WATER TO BE USED AS: 3 Fublic water supply 8 Air conditioning 11 inject 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Othe 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well | | | | | | | her (Specify below) | |
| | | | | | | | onitoring well | iattle |
| Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo | | | | | | | | |
| | | | | | | | | If yes, mo/day/yrs |
| Sample was submitted | | | | | | | | |
| 5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: GluedX Clamped | | | | | | | | |
| | | | 5 Wrought | Iron 8 Cond | rete tile | CASIN | | |
| | | RMP (SR) | | | | / below) | | |
| 2 PVC 4 ABS 7 Fiberglass Threaded Blank casing diameter 5 in. to ft., Diameter in. to ft. Casing height above land surface 1 in., Weight 1 B 2 l. lbs./ft. Wall thickness or guage No. 2 ft. | | | | | | | | |
| Coging height shove land surface in Weight 17 R 26 lbs /4 Well this language No 9 4 | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | |
| 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 Gauzed 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 | | | | | | | | |
| GRAVEL PACK INTERVALS: From QQ ft. to 100 ft., From ft. to ft. | | | | | | | | |
| From | | | | | | | | |
| 110111111111111111111111111111111111111 | | | | | | | | |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other | | | | | | | | |
| Grout In | | | | | | . ft. to | ft., From | ft. toft. |
| What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify | | | | | | | | |
| | Septic tank Sewer lines | | 4 Lateral lines 5 Cess pool | | 10 Lives | - | nsecticide Storage Abandoned water well | 16 Other (specify below) |
| | | wer lines | | | | | Dil well/gas well | ociow) |
| 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well. Direction from well? None Within 4 mi. How many feet? Fin. Pasture for Catite | | | | | | | | |
| FROM | TO | | LITHOLOGIC | | FRON | | PLUGGING INT | |
| 0 | 5 | Clay | | | | | | |
| 5 | 35 | ine | | | | | | |
| 35 | 70 | Yello. | v Shale | 2 | | | | |
| /> · | (1) de- | / | | | | | | |
| 10 | 95 | 320 | 11 | | | | | |
| 12 1- | 121 | 1124 | -3 4 | | | | | |
| 43 | 90 1 | vata | | | | | | |
| ah | 100 | Rea. | Shale | | | | | |
| 70 | 100 | Gray | SHOULE | | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged | | | | | | | | |
| 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) 3 | | | | | | | | |
| Kansas Water Well Contractor's License No | | | | | | | | |
| | e business na | | | | | y (signature) | MIN BU | we kee |
| INSTRUC | TIONS: Use | ypewriter or l | pall point pen. PLEA | ASE PRESS FIRMLY and A | PRINT clea | rly. Please fill in blan | ks, underline or circle the c | orrect 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.kdheks.gov/waterwell/index.html.