| WATER WELL, RE | CORD | Form WWC | -5 | Division of Water | r Resource | s; App. No. | | |
|--|----------------------------|--|---------------|---------------------------|--------------|----------------|-----------------|-------------|
| 1 LOCATION OF W | , / 、 | Fraction | | ection Number | | ip Number | Range Nu | mber |
| County: Jourg | wich | NE 1/4 NE 1/4 1 | | 28 | T 25 | | R / | Æ /W |
| Distance and direction | on from nearest town of | or city street address of w | | obal Positioning atitude: | Systems | (decimal deg | rees, min. of 4 | digits) |
| located within city: | 8924 N | Redgelivor | CT | | | | | |
| 2 WATER WELL O | | Longitude: | | | | | | |
| RR#, St. Address, B | ox# : 89011 | N Ridge wood | oct D | Datum: | | | | |
| City, State, ZIP Cod | le : 1/2/2 | Center Ko | | Pata Collection I | Method: | | | |
| 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL | | | | | | | | |
| LOCATION | | | | | | | | |
| WITH AN "X" IN | Depth(s) Groundw | ater Encountered (1) | | . ft. (2) | | ft. (3) | | ft. |
| SECTION BOX: | | | | | | | /yr&.:.\$ | 28 |
| N | | | | | | | | |
| Est. Yieldgpm: Well water wasft. after hours pumping | | | | | | | . gpm | |
| WELL WATER TO BE OSED AS. 5 Tuble water supply 6 All conditioning 17 injection well water supply 9 Dewatering 12 Other (Specify below the conditioning 17 injection well water supply 12 Other (Specify below the conditioning 17 injection well water supply 12 Other (Specify below the conditioning 17 injection well water supply 15 All conditions 1 | | | | | | | below) | |
| Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well | | | | | | | | |
| | | | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes No If yes, mo/day/yrs | | | | | | | | |
| Sample was submitted | | | | | | | | |
| 5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued.X Clamped | | | | | | | | |
| 5 TYPE OF CASING | USED: 5 Wrou | ght Iron 8 Con | | | G JOINTS | | | |
| | | | r (specify be | | | | | |
| Blank casing diameter | | | | | | | | |
| Casing height above land surface | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | |
| 1 Steel 3 Stainless Steel 5 Fiberglass (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) | | | | | | | | |
| 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw cut, 10 Other (specify) | | | | | | | | |
| From | | | | | | | | |
| GRAVEL PACK INTERVALS: From. 24 ft. to ft., From ft. to ft. | | | | | | | | |
| From ft. to | | | | | | | | |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 7 Bentonite 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 16 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 | | | | | | | | |
| Watertight sew | | • | 12 Fertilize | feet? | - N | | •••••• | |
| Direction from well? FROM TO | LITHOLO | | FROM | ТО | | GGING INT | | |
| 7 7 | 1 Towns in | D Color | 110111 | | 120 | 301110 1111 | 2111120 | |
| 2 20 | Cours | 1 | | | | | | |
| 20 23 | Sandy | Jan | | | | | | |
| 20 23 | Jan I Cl | au | | | | | | |
| 28 42 | Sand | // | | | | | | |
| 42 37 | Clay | - f - , | | | | | | |
| 57 80 | Blue X | Thale | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 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) S S and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Ligense No This Water Well Record was completed on (mo/day/year) | | | | | | | | |
| Kansas Water Well Con | ntractor's Ligense No. | . Co. 1/ This Wate | r Well Reco | ord was completed | Top (mo/ | day/year) | 1-4-08 | <u></u> |
| under the business nam | e of Hage | Whillen a | by | (signature) | Cer | 111 | | |
| INSTRUCTIONS: Use typ | ewriter or ball point pen. | PLEASE PRESS FIRMLY and onment, Bureau of Water, Geo | PRINT clearly | . Please fill in blank | s, underline | or fire the c | orrect answers. | Send top |
| 785-296-5522. Send one | e to WATER WELL | OWNER and retain one | or your reco | ords. Fee of \$5. | .00 for ea | ich constructe | d well. Vis | sit us at |
| http://www.kdheks.gov/waterwell/index.html. | | | | | | | | |