| WATER WELL RECORD NE SE SE SW Form WWC-5 Division of Water Resources; App. No. | | | | | | | | | | | | |
|---|---------------------------|-------------------------------|----------------|--------------|---------------------------------------|-------------|------------------------------|--|-----------|--|-----------------|---|
| Cour | ıty: Se | 'da | TER WELI | <u>:</u> | Fraction 1/4 2 | W 1/4 8 | X 1/4 | Section Nur | mber | Township Number T 210 S | Range N | Number (Ê)W |
| Dista | ince and di | rection | from nearest | t town or c | ity street ac | ddress of w | ell if | Global Posit | tioning | Systems (decimal degr | ees, min. o | f 4 digits) |
| locat | ed within o | ity? | 7780 | rifw | xdCt | | | Latitude: | | | | |
| 1 | V | $\mathbf{V} \cdot \mathbf{C}$ | れっちひ | • | | | | Longitude | : | | | |
| 2 WA | TER WEI | LL OW | NER: LO | | FILIT | Hen | | Elevation: | | | | |
| City | , St. Addre State 711 | SS, BOX | X# | 18 0 | CI HW | poac | , , | Datum: | | | | |
| RR#, St. Address, Box # : 1778 D Ci AwoodCt, City, State, ZIP Code : Wich La LS (012 Data Collection Method: 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL | | | | | | | | | | | | |
| | | LL'S | 4 DEPTH | OF COM | PLETED | WELL | | • | II. | | | |
| | CATION 'H AN "X' | , _{IN} | Denth(s) G | roundwate | r Encounter | red (1) | 17) | ft (2 | 2) | ft (3) | | ft |
| | TION BO | | WELL'S S | TATIC W. | ATER LEV | /EL | O ft | below land: | surface | ft. (3) measured on mo/day/ | vi 5 -21 | 0-09 |
| 220 | N | | Pur | np test dat | a: Well w | ater was | | ft. after | | hours pumping | | gpm |
| | | - | Est. Yield. | .4.0.gpr | n: Well w | ater was | | ft. after | | hours pumping | | gpm |
| _N | W NE | | | TER TO E | BE USED A | AS: 5 Pub | lic water s | supply | 8 Air c | onditioning 11 Inje | | |
| w | W | | | | | | | | | | | |
| | | | 2 Irrigation | n 4 Inc | dustrial (| Domest | ic (lawn & | garden) I | U Moni | toring well | ••••• | • |
| Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs | | | | | | | | | | | | |
| Sample was submitted | | | | | | | | | | | | |
| Sample was submitted | | | | | | | | | | | | |
| 5 TYP | E OF CAS | ING U | SED: | 5 Wrought | Iron | 8 Conc | rete tile | | CASING | JOINTS: Glued | Clamp | ed |
| 1 | Steel | 3 RMI | P(SR) | 6 Asbestos | -Cement | 9 Othe | r (specify | below) | | JOINTS: Glued Welded Threaded | | ••••• |
| 1 | PVC | 4 ABS | آ سُد | 7 Fiberglas | s | | | · · · · · · · · · · · · · · · · · · · | | Threaded | | |
| Blank ca | asing diam | eter | : in. t | to わし | ? ft., Dia | ameter | i : | n. to | ft., I | Diameter: | in. to | <u>.</u> |
| Casing I | neight abov | e land | surface | · | in., We | eight | ·D | lbs./ft. V | Wall thic | kness or guage No | ODK | LO |
| I . | | | PERFORATI | | | Ave | 0.4 | DC | | 11 Other (Cresify) | | |
| 1 Steel 3 Stainless Steel 5 Fiberglass 7 VC 9 ABS 11 Other (Specify) | | | | | | | | | | | | |
| | | | TION OPEN | | | 0 KW (SI | 10 7 | 15005105-001 | mem | 12 None used (open | noic) | |
| | Continuou | | | | | oped 7 T | orch cut | 9 Drilled | holes | 11 None (open ho | le) | |
| 2 | Louvered : | shutter | 4 Key pund | ched 6 V | Vire wrapp | ed 🙈 | Saw Cut | 10 Other | (specify |) | | |
| 2 Louvered shutter 4 Key punched 6 Wire wrapped Saw Cut 10 Other (specify) | | | | | | | | | | | | |
| From | | | | | | | | | | | | |
| | GRAVEL | PACK | INIEKVAL | LS: From | | ft. to . | | λ π., Fi A Fi | rom | ft. to ft. to | | π. Α |
| | | | | T TOIII. | •••••• | 11. 10 . | | п., г | 10111 | 11. 10 | •••••• | 11. |
| 6 GRO | UT MATI | ERIAL | : 1 Neat co | ement 2 | Cement gr | out (3) Be | ntonite | | | | | |
| Grout In | itervals: | Froi | m | ft. to | ft | ., From | | ft. to | ft. | , From | ft. to | ft. |
| | | | of possible | | | | 10.7. | | 10.7 | | 1604 (| |
| | Septic tank Sewer line | | | ss pool | 7 Pit privy 8 Sewage | | 10 Livesto | | | ecticide Storage andoned water well | 16 Other (| - |
| | | | lines 6 See | | 9 Feedyar | | l 1 Fuel ste 2 Fertiliz | er Storage | | well/gas well | below) | |
| | n from wel | | | | | | How many | | | | | |
| FROM | TO | | | HOLOGIC | | | FROM | | | PLUGGING INTE | | |
| ος | 3 | | ton 8 | 011 | | | | | | | | |
| 5 | 10 | (| lay | | 1 | | | | | | | |
| LQ_ | 20 | _£ | ine | san | 9 | 1 0 0 | 1 | | | | | |
| 70 | 40 | <u>CO</u> | محد | sand | J MLC | 1. Cra | 12 <u> </u> | - | | | | |
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| | | | | | | | | | | | | |
| 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) 51.2000 and this record is true to the best of my knowledge and belief. | | | | | | | | | | | | |
| Kansas Water Well Contractor's License No This Water Well Record was completed on (mo/day/year) | | | | | | | | | | | | |
| under my jurisdiction and was completed on (mo/day/year) 5.20.08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No This Water Well Record was completed on (mo/day/year) 21.05. INSTRUCTIONS: Use typewriter or ball point pen. PLEASA PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top | | | | | | | | | | | | Sond to |
| INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correct answers. Send to 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 | | | | | | | | | | | | |
| 785-296-5 | 522. Seno | l one t | to WATER V | VELL OWN | NER and re | tain one fo | your re | cords. Fee | of \$5.0 | o for each constructed | well. V | isit us at |
| http://www | w.kdhe.state.k | | | | | | | | | | | |

KSA 82a-1212