| stance and direction from nearest town or city street address of well if located within city? 14 mile North 6 Kecky Rd. on Hillside N. E. Side Rd. WATER WELL OWNER: HART HIMSTRONG R#, St. Address, Box #: 7344, W. 16 Cf. Board of Agriculture, Division of Water Resour | | WAT | ER WELL RECORD F | orm WWC-5 | KSA 82a- | | | |
|--|--|--------------------------------|------------------------------|---------------|---------------------------------------|-----------------|-------------------|---|
| purposed direction from masses toyin or five street address of wells because within rights of the control of th | County SEDERS | WELL: Fraction | W NW WSW | 1/4 | // | 1 7 2 | (s | lr 7 G w |
| WATER WELL OWNER! ## St. Address, Box #: ## JS. Addr | Distance and direction from | n nearest town or city street | address of well if located | within city? | side N | 1. E. S | ide Rd. | |
| Application Number: Applicati | | R: HART HRA | NSTRONG | | | | | |
| LOCATE WELL'S LOCATION WITH DEPTH OF COMPLETED WELL STATION BOX: Depth(s) discussive recountered 1, t. below land surface measured on moldalyyy Depth(s) discussive recountered 1, t. below land surface measured on moldalyyy Well was there was t. after hours pumping gr Well was there was t. after hours pumping gr Depth of the was t. after Depth of the was t. after hours pumping gr Depth of the was t. after t. af | R#, St. Address, Box # lity, State, ZIP Code | WICHITH | FANISAS | | | | - | Division of Water Resource |
| Heghnic Jordanowsker Procurement WELL'S STATIC WATER LEVEL. Description of the Control of the | LOCATE WELL'S LOCA | TION WITH 4 DEPTH OF | COMPLETED WELL | 85 | _ | | | |
| Pump test data: Well water was to after to hours pumping griss. Yield Sport Medical Sport Wester was to after to hours pumping griss. Yield Sport Medical Sp | AN X IN SECTION BY | Deptn(s) Groun | e 1 | _ | | | | |
| Bish Hole Dismeters. J. in to 10 months of the Comment of the Comm | | | | | | | | |
| Bore Hole Diameter in. to 5 Public water supply 8 Dewatering 11 Injection well 12 Other (Specify below) 9 Dewatering 12 Other (Specify below) 12 Ingillion 4 Industrial 7 Lawn and garder only 10 Observation well was a chemical bacteriological sample submitted to Department? Ves | NW | · Nt = = 1 | | | | | • | . • |
| WELL WATER TO BE USED AS: Domestix Domestix S Feeding S A Feedi | . | | | | | | | |
| Value of the control of the contro | w | | _ | _ | | | | |
| Was a chemical/backeriological sample submitted to Department? Yes | X sw | SE 1 Domesti | | | | _ | | Other (Specify below) |
| TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 10 In the company i | 1 | | | _ | • | | | |
| TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 4 ABS ank casing diameter 5 in to 6 Asbestos-Cement 9 Other (specify below) 7 Fibragiass 1 Threaded. 1 | | | al/bacteriological sample su | bmitted to De | | | | |
| 1 Steel 3 RMP (SR) 6 Abbestos-Cement 9 Other (specify below) Welded. 7 Fiberglass Threaded. 7 Fiberglass Threaded. 1 In to the fiberglass Threaded. 1 In to the fiberglass Threaded. 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify). 2 Brass 4 Galvanized steel 5 Fiberglass 8 RMP (SR) 11 Other (specify). 2 Brass 4 Galvanized steel 5 Fiberglass 8 RMP (SR) 11 Other (specify). 2 Brass 4 Galvanized steel 5 Fiberglass 8 RMP (SR) 11 Other (specify). 2 Brass 4 Galvanized steel 5 Fiberglass 8 RMP (SR) 11 Other (specify). 3 Brain 1 Other (specify). 3 Brain 1 Other (specify). 3 Saw gut 11 None (open hole). 4 Louveed shufter 4 Key punched 7 Torch cut 10 Other (specify). 3 Saw gut 11 None (open hole). 5 From 1, to 1, from 1, to 10 Other (specify). 6 Wire wapped 3 Saw gut 11 None (open hole). 6 RAVEL PACK INTERVALS: From 1, to 1, from 1, to 10 Other (specify). 6 GRAVEL PACK INTERVALS: From 1, to 1, from 1, to 10 Other (specify). 6 GRAVEL PACK INTERVALS: From 1, to 1, from 1, to 10 Other (specify). 7 From 1, to 10 Other (specify). 8 Saw gut 11 None (open hole). 9 From 1, to 10 Other (specify). 1 None (open hole). 1 Other (specify). 1 Other (| TYPE OF BLANK CAS | | 5 Wrought iron | 8 Concre | | | | |
| ank casing diameter in to the fit in to the sing height above land surface. In, weight in the sing height above land surface. For Coff ScreEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole) 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole) 3 REEN OR PERFORATION OPENINGS ARE: 1 Continuous stot 3 Mill stot 6 Wire wrapped 1 Dolliner (specify) 2 Louvered shutter 4 Key punched REEN-PERFORATED INTERVALS: From fit to fit, Fr | | | • | | | | | · · |
| in, weight above land surface. Destrict Wall thickness or gauge No. | 2 PVC | 4 ABS | 7 Fiberglass | | | • | Threa | ded |
| 1 Steel 3 Stainless steel 5 Fiberglass 5 Fiberglass 8 FMP (SR) 11 Other (specify) 12 Other (specify) 12 Other (specify) 12 Other (specify) 12 Other (specify) 13 Other (specify) 14 Other (specify) 15 Other (specify) 15 Other (specify) 16 Other (specify) 16 Other (specify) 17 Other (specify) 18 Other (specify) 18 Other (specify) 19 Other (specify) 19 Other (specify) 10 Other (specify) 11 Other (specify) 11 Other (specify) 12 Other (specify) 13 Other (specify) 13 Other (specify) 14 Other (specify) 15 O | _ | , | | | | | | |
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| 2 Brass 4 Galvanizad steel 6 Concrete tile 9 ABS 12 None used (open hole) CREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 2 Dirilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) CREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft., From ft., F | | | E Ethanologo | - | - | | | |
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| REEN-PERFORATED INTERVALS: From. ft. to ft. From ft. To ft. Fr | | | | • • • | | | es | Trans (open nois) |
| From ft. to ft., From f | 2 Louvered shutter | 4 Key punched | 7 Torch o | eut | | 10 Other (spe | cify) | |
| GRAVEL PACK INTERVALS: From ft. to ft., From ft., | CREEN-PERFORATED I | NTERVALS: From | | | · · · · · · · · · · · · · · · · · · · | | | |
| GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other | | 1 | | | | | | |
| GROUT MATERIAL: Out Intervals: From ft. to ft., From | GRAVEL PACK | | | . . | | | | |
| out Intervals: From . 3 . ft. to | GROUT MATERIAL: | | | 3 Rento | | | • | ···· - · - · · · · · · · · · · · · · · |
| that is the nearest source of possible contamination: Septic tan 4 Lateral lipes 7 Pit privy 11 Fuel storage 15 Oil well/Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 3 Watertight sewer/lines 6 Seepage pit 9 Feedyard 13 Insecticed storage How many feet? How man | | | - | | | | | |
| 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 3 Watertight sewer, lines 6 Seepage pit 9 Feedyard 13 Insecticide storage How many feet? How many feet? LITHOLOGIC LOG FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG LITHOLOGIC LOG FROM TO LITHOLOGIC LOG LITHOLOGIC LOG CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and water the business name of LECENER WELL WATER This Water Well Record was completed on (mo/day/yer) This Water Well Record was completed on (mo/day/yer) LITHOLOGIC LOG LITHOLOGIC LO | | r | | | | | | |
| 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage How many feet? FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG CONTRACTOR'S OR LANDOWNER'S CERTIFICATION. This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w mpleted on (mo/day/year) | 1 Septic tank | 4 Lateral lines | 7 Pit privy | | 11 Fuel s | torage | 15 O i | well/Gas well |
| How many feet? 62 FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG LITHOLOGIC LOG AND LITHOLOGIC LOG FROM TO LITHOLOGIC LOG LITHOLOGIC LOG FROM TO LITHOLOGIC LOG LITHOLOGIC LOG AND LITHOLOGIC LOG FROM TO LITHOLOGIC LOG LITHOLOGIC LOG AND LITHOLOGIC LOG LITHOLOG LITHOLOG LITHOLOG LITHOLOG LITHOLOG LITHOLOG LITHOLOG LITHOLOG LITHOLOG | | • | | n | | _ | 16 Ot | her (specify below) |
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| to accion to Kappas Department of Health and Environment Division of Environment, Environmental Geology Section, Topeka, KS 66620, Send one to WATER WE | STRUCTIONS: Use type | writer or ball point pen, PLEA | SE PRESS FIRMLY and I | PRINT clearly | y. Please fill in | blanks, underl | ine of circle the | correct answers. Send to |
| WNER and retain one for your records. | ree copies to Kansas Dep | partment of Health and Enviror | nment, Division of Environm | ent, Environn | nental Geology | y Section, Tope | ka, KS 66620. | Send one to WATER WEL |