| _ | | | WATE | R WELL RECORD | Form WWC-5 | KSA 82a- | | | | |
|--|---|-----------------------|--|---|--------------------------|---|--------------------------|--------------------------|---------------------------|--|
| 1 LOCATI | ON OF WAT | ER WELL: | Fraction | | Sec | tion Number | Township Nun | | Range Number | |
| County: | SE | DGWICK | SW 1/4 | | SE 1/4 | 30 | T 26 | S | R le E/W | |
| | nd direction Litchfi | | | address of well if loca ita, Kansas | ated within city? | | | | | |
| | R WELL OW | | John P | | | | | | | |
| _ | Address, Box | | | itchfield | | Board of Agriculture, Division of Water Resources | | | | |
| | , ZIP Code | | | a, Kansas | | Application Number: | | | | |
| | • | CATION WITH | | | 40 | 4 ELEVA | | | | |
| LOCATE WELL'S LOCATION WITH DEPTH OF COMPLETED WELL40 | | | | | | | | | | |
| T [| 1 | | WELL'S STATIC WATER LEVEL \dots 15. \dots ft. below land surface measured on mo/day/yr \dots 5-22- | | | | | | | |
| Pump test data: Well water was ft. after hours pumping | | | | | | | | | ing gpm | |
| Est. Yield gpm: Well water was ft. after hours pumping | | | | | | | | | | |
| | | | | | | | | | | |
| ŧ w ⊦ | W I I WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection | | | | | | | | | |
| - 1 | 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Sp. | | | | | | | - | | |
| - | - sw | SE | 2 Irrigation | | | | 0 Observation well | | | |
| 1 1 | - | ן א | _ | | === | | | | o/day/yr sample was sub- | |
| į L | | /\ | mitted | out | | | er Well Disinfected | - | * * | |
| 5 TYPE (| OF BLANK C | ASING USED: | | 5 Wrought iron | 8 Concre | | | | . XX . Clamped | |
| 1 St | | 3 RMP (SI | R) | 6 Asbestos-Cemer | | specify below | | | | |
| 2 PV | | 4 ABS | " | | | | ene .SDR 26 | | id | |
| | _ | | in. to 25 | | | | | | to ft. | |
| | | | | | | | | | | |
| Casing height above land surface | | | | | | | | | | |
| 1 Ste | | 3 Stainless | | 5 Fiberglass | | P (SR) | | | | |
| 2 Br | | 4 Galvaniz | | 6 Concrete tile | | | | | | |
| 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole) | | | | | | | | | · · | |
| 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes | | | | | | | | | rtene (open nele) | |
| 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) | | | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From | | | | | | | | | | |
| From | | | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | | | |
| ` | | | From | | | - | | | ft. | |
| 6 GROUT | MATERIAL | 1 Neat o | cement | 2 Cement grout | | | | | | |
| GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other | | | | | | | | | | |
| What is th | e nearest so | urce of possible | contamination: | • | | 10 Livest | ock pens | 14 Abar | ndoned water well | |
| | 1 Septic tank 4 Lateral I | | | 7 Pit privy | | 11 Fuel s | storage | 15 Oil v | vell/Gas well | |
| 2 Sewer lines 5 Cess p | | | pool | • • | | 12 Fertilizer storage | | 16 Other (specify below) | | |
| | | | • | | | 13 Insecticide storage | | | | |
| 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage Direction from well? South How many feet? 31 | | | | | | | | | | |
| FROM | TO | | LITHOLOGIC | LOG | FROM | ТО | L | ITHOLOGIC | LOG | |
| 0 | 3 | Topso | il | | | | | | | |
| 3 | 8 | Clay | | | | | | | | |
| 8 | 17 | - | SAnd | | | | | | | |
| 17 | 40 | | m Sand | | | | | | | |
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| CONT | RACTOR'S C | OR LANDOWNE | R'S CERTIFICAT | ION: This water well | was (1) constru | cted, (2) reco | nstructed, or (3) plu | igged under | my jurisdiction and was | |
| 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) | | | | | | | | | | |
| Water Wel | Contractor's | R License No | 226 | This Water | Well Record wa | s completed of | on (mo/day/yr) | 5-3 | 30-86 | |
| under the | husiness ner | ne of Ha | rn Well a | Pump Service | Inc. | by (signat | ure) MA | res al | ruels) | |
| INSTRUC | TIONS: Use tv | pewriter or ball poin | nt pen. <i>PLEASE PRE</i> | SS FIRMLY and PRINT (| dearly. Please fill in I | blanks, underline | or circle the correct an | swars. Send to | op three copies to Kansas | |
| Departme | nt of Health and | d Environment, Offic | ce of Oil Field and Er | nvironmental Geology, Re | gulation and Permit | ing Section, Top | eka, Kansas 66620-750 | 00, Telephone: | 913-862-9360. Send one | |
| to WATE | R WELL OWN | ER and retain one | tor your records. | | | | | | | |