| | | RECORD Form WW | | | |
|--|---------------------------------|---------------------------|--|--|--|
| LOCATION OF WATER WELL: | Fraction | | Section Number | Township Number | |
| County: SEDGWICK | SE ½ NE | | | т 27 <u>е</u> | <u>к 1 е</u> |
| Distance and direction from nearest to | wn or city street address of | | | | |
| 1112 DOUGLAS | | | | | |
| 2 WATER WELL OWNER: QUIK | I KIP #349 | | | | |
| RR#, St. Address, Box # : 1112 | DOUGLAS | | | Board of Agriculture | , Division of Water Resources |
| City State ZIP Code · WICH | IITA KS 67266 | | | Application Number | |
| 3 LOCATE WELL'S LOCATON WITH | 41.1 | | 2E.E | | |
| AN "X" IN SECTION BOX: | DEP IN OF COMPLE | TED WELL | 23.3 ft. ELEV. | ATION: | |
| | | | | | ft. 3 Ft. 7 /day/yr 11/6/01 urs pumping Gpm purs pumping Gpm |
| N | WELL'S STATIC WATER | LEVEL 18.79 | _ ft. below land su | irface measured on mo | /day/yr 11/6/01 ਟੁਂ |
| | Pump test da | ta: Well water was | Ft | . after ho | urs pumping Gpm |
| | | | | | ours pumping Gpm |
| NVV | Bore Hole Diameter | .625 In to | 25.5 | ft and | in. to Ft. 2 |
| W W | WELL WATER TO BE U | SED AS: 5 Public wa | ter supply | 8 Air conditioning | 11 Injection well |
| , <u>₹</u> , , , , , , , , , , , , , , , , , , , | 1 Domestic 3 Fe | ed lot 6 Oil field w | ater supply | 9 Dewatering | in. to Ft. 7 11 Injection well 12 Other (Specify below) |
| | 2 Irrigation 4 Inc | lustrial 7 Lawn and | garden (domestic) |) 10 Monitoring well | MW-4 |
| SW SE | | | | | yes, mo/day/yr sample was |
| | Submitted | ogical sample submitte | | | |
| | | | | er Well Disinfected? Ye | |
| 5 TYPE OF BLANK CASING USED: | | · U | oncrete tile | | Glued Clamped |
| 1 Steel 3 RMP | | bestos-Cement 9 C | ther (specify below | | Welded |
| 2 PVC 4 ABS | 7 Fit | perglass | | | Threaded X |
| | , F | • | | | |
| Blank casing diameter 2 | in. to 15.5 E |)ia | In. to | _ ft., Dia | in. to Ft. |
| Casing height above land surface | FLUSH in., weig | ht SCH 40 | Lbs./ft. | Wall thickness or gaug | e No. |
| TYPE OF SCREEN OR PERFORATION | | | | 10 Asbestos- | |
| 1 Steel 3 Stain | less steel 5 Fit | erglass | 8 RMP (SR) | 11 Other (spe | Cify) |
| 2 Brass 4 Galv | anized steel 6 Co | | 9 ABS | 12 None used | (open hole) |
| SCREEN OR PERFORATION OPENI | | 5 Gauzed wrap | bed | | 11 None (open hole) |
| 1 Continuous slot 3 | Mill slot | 6 Wire wrapped | | 9 Drilled holes | |
| | Key punched | 7 Torch cut | | 10 Other (specify) | |
| SCREEN-PERFORATED INTERVALS | | | | om | ft. to Ft. |
| | | | | | 4 4a T4 |
| | | ft. to | | | |
| SAND PACK INTERVALS: | | ft. to2 | | | ft. to Ft. |
| | From | ft. to | and the second state of th | om | ft. to Ft. |
| 6 GROUT MATERIAL: 1 Neat | t cement 2 Cemen | t grout 3 | Bentonite | 4 Other | |
| Et Et I | | | | | |
| Grout Intervals From3 14 ft. to 11 From2 11 to 0 ft. From ft. to Ft. | | | | | |
| What is the nearest source of possible | | | | | Abandoned water well |
| 1 Septic tank | 4 Lateral lines | 7 Pit privy | 11 Fuel st | torage 15 | Oil well/ Gas well |
| 2 Sewer lines | 5 Cess pool | 8 Sewage lagoon | 12 Fertiliz | er storage 16 | Other (specify below) |
| 3 Watertight sewer lines | 6 Seepage pit | 9 Feedyard | 13 Insecti | cide storage | Contaminated Site |
| Direction from well? | | | | | |
| FROM TO CODE | LITHOLOGIC LO | DG FR | | | IG INTERVALS |
| | LAY W SILT | | | | |
| | LAYEY SILT | | | | [|
| | ILTY SAND | | | | c |
| | ND OF BOREHOLE | | | ······································ | |
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| | EDIS CEDTIEICATIONI TH | e water well was (v) co | structed (2) recor | structed or (3) plugger | Lunder my jurisdiction and w |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w | | | | | |
| Completed on (mo/day/yr) 11/5/01 And this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 11/20/01 | | | | | |
| Water Well Contractor's License No. | 585 | Τ | his Water Well Red | cord was completed on | (mo/day/yr) 11/20/01 |
| under the business name of | Associated En | vironmental, Inc | . Bv | (signature) Darin I | R Duncan |
| INSTRUCTIONS: Please fill in blar | iks and circle the correct answ | ers. Send three copies to | Kansas Department | of Health and Environme | nt, Bureau of Water, Topeka, |
| Kansas 66620-0001. Telephone: 9 | 13-296-5545. Send one to W/ | ALER WELL OWNER and | retain one for your r | ecoras. | |

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