| 1 LOCATI | | | | ER WELL RECORD | | -5 KSA 82 | | |
|---|--|--|--|---|---|--|--|---|
| | | ATER WELL: | Fraction | | | ction Numbe | | |
| | Montgo | | 1/4 | | NW 1/4 | 31 | T 34 | S R 17 (E)W |
| 400 N. | Linden, | Coffeyville, KS | S | address of well if lo | cated within cit | y'? | | |
| | | WNER: Farmla | | , Inc. | | | | |
| | | ex# : P.O. Bo | | | | | _ | e, Division of Water Resources |
| | | Coffeyv | | | | | Application Numbe | |
| 3 LOCAT | E WELL'S | LOCATION SECTION BOX: | | | | | | 720.26 |
| V V I I I I /- | | N | | | | | | ft. 3 ft. |
| T I | 1 | | | | | | | o/day/yr |
| | , , , | NE NE | | | | | | urs pumping gpm |
| | 1000 | | | | | | | urs pumping gpm |
| Mile M | 3 | | | | | · · · · · · · · · · · · · · · · · · · | | in. to ft. |
| = " | ì | | WELL WATER | TO BE USED AS: | | | 8 Air conditioning | 11 Injection well |
| 1 | 0.47 | 05 | 1 Domestic | | | | | 12 Other (Specify below) |
| | SW | SE | 2 Irrigation | | | | 10 Monitoring well | |
| <u>*</u> | 3 | | | al/bacteriological sa | mple submitted | - | | If yes, mo/day/yr sample was |
| | | S | submitted | | | | /ater Well Disinfected? | |
| | | CASING USED: | | 5 Wrought iron | | rete tile | | S: Glued Clamped |
| 1 St | | 3 RMP(SI | R) | 6 Asbestos-Ceme | | r (specify be | * | Welded |
| (2)P\ | | 4 ABS | | 7 Fiberglass | | | | Threaded V |
| | | | | | | | | in. to ft. |
| Casing he | ight above | land surface | 32.16 | .in., weight | | | ./ft. Wall thickness or g | gauge No Sch. 40 |
| TYPE OF | SCREEN (| OR PERFORATIO | N MATERIAL | | (7) P | | 10 Asbesto | |
| 1 St | :eel | 3 Stainless | s steel | 5 Fiberglass | 8 R | MP (SR) | 11 Other (s | specify) |
| 2 Br | | 4 Galvaniz | | 6 Concrete tile | 9 A | 3S | 12 None u | sed (open hole) |
| SCREEN (| OR PERFO | RATION OPENIN | IGS ARE: | 5 G | auzed wrapped | | 8 Saw cut | 11 None (open hole) |
| (1) 0 | ontinuous | slot 3 N | /ill slot | 6 W | ire wrapped | | 9 Drilled holes | |
| | ouvered sh | | (ey punched | | rch cut | | 10 Other (specify) | |
| SCREEN-I | PERFORA | TED INTERVALS | · From | | | | | |
| | | | | | | | | \dots ft. to \dots ft |
| | | | From | ft. to | o | ft., F | rom | ft. to ft |
| G | SRAVEL PA | ACK INTERVALS | From : From | ft. to | 22 | ft., F | rom | ft. to ft |
| | | ACK INTERVALS | From | | 22. | ft., F ft., F ft., F | rom | ft. to |
| 6 GROUT | Γ MATERI <i>A</i> | ACK INTERVALS L: 1 Neat | From From | | 22 | ft., F ft., F ft., F | rom | ft. to |
| 6 GROUT | Γ MATERIA rvals: Fro | ACK INTERVALS AL: 1 Neat | From From From cement . ft. to 1 | | 22 | ft., F ft., F ft., F ft., F to 10 | rom | ft. to ft. ft. to ft. ft. to ft. |
| 6 GROUT | Γ MATERIA rvals: Fro | ACK INTERVALS L: 1 Neat | From From From cement . ft. to 1 | | 22. 22. 3Ben | ft., F ft., F ft., F ft., F to 10 | rom | .ft. to .ft .ft. to .ft .ft. to .ft |
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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 top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.