| WATER WELI | L RECORD | Form WWC-5 | | Division of | Water Resources; App. No. L | | |
|--|---|----------------------------|---------------|---------------------|--|---------------------------|--|
| 1 LOCATION OF WATER WELL: County: | | Fraction NE 1/4 SE 1/4 SE | = 1/4 | | r Township Number | | |
| | rection from nearest town or c | ity street address of well | /4 l if | Global Positio | ning Systems (decimal deg | | |
| located within city? Latitude: 39.3/18 Z | | | | | | | |
| 2 WATER WELL OWNER: J.R. CHAREST | | | | Longitude: 97-10991 | | | |
| RR# St Addre | KLI) | | | 1284 | THE STATE OF THE S | | |
| City, State, ZIF | ess, Box # : /247 05/16 | ER WS 1.71137 | | Datum: | | 17.4 | |
| Data Concention Method. | | | | | | | |
| 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL | | | | | | | |
| WITH AN "X" IN Depth(s) Groundwater Encountered (1)9.3 | | | | | | | |
| WITH AN "X" SECTION BO | | | | | | | |
| | Est. Yield. 70 | | | | | | |
| WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well | | | | | | | |
| WELL WATER TO BE CSED AS: 5 Tuble water supply 6 An conditioning 17 injection went with the conditioning 17 injection went with the conditioning 17 injection with the condition with the conditioning 18 injection with the condition with the conditio | | | | | | | |
| 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well | | | | | | | |
| | | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes | | | | | | | |
| Sample was submitted Water well disinfected? Yes No | | | | | | | |
| S | | | | | | | |
| 5 TYPE OF CAS | ING USED: 5 Wrought | Iron 8 Concre | ete tile | CA | SING JOINTS: Glued. | Clamped | |
| 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded | | | | | | | |
| 2 PVC 4 ABS 7 Fiberglass Threaded | | | | | | | |
| Blank casing diam | eter in. to . 155 | ft., Diameter | i | in. to | ft., Diameter | in. toft. | |
| Casing height above land surface | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | |
| 1 Steel 3 Stainless Steel 5 Fiberglass 9 ABS 11 Other (Specify) | | | | | | | |
| 2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | |
| 1 Continuous slot Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) | | | | | | | |
| 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw cut 10 Other (specify) | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From | | | | | | | |
| From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From. 2.5 ft. to ft., From ft. to ft. | | | | | | | |
| From 120 ft. to 155 ft., From ft. to ft. | | | | | | | |
| | FIOIII | 11. 10 | . <i>D</i> | п., гто | It. W | It. | |
| 6 GROUT MAT | ERIAL: 1 Neat cement 2 | Cement grout 3 Bent | onite | 4 Other | | | |
| Grout Intervals: | From 3 ft. to | 25 ft. From ./ | こ | ft. to /20 | ft From | ft. toft. | |
| What is the nearest source of possible contamination: | | | | | | | |
| 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide storage 16 Other (specify | | | | | | | |
| 2 Sewer line | 8 Sewage lagoon 11 | | | | below) | | |
| 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/gas well EXESTALL. WELL | | | | | | | |
| Direction from well? NORTH NORTH WEST. How many feet? 100 | | | | | | | |
| FROM TO | LITHOLOGI | C LOG | FROM | I TO | PLUGGING INT | ERVALS | |
| 0 17 | CLAY, BROWN | | | | are make. | | |
| 17 37 | SHALE, TAN | | | | | | |
| 37 43 | CALCAREOUS SHAL | E | | | | | |
| 43 78 | SHALF, THN TO GA | 2AY | | | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | | |
| 78 85 | LIMESTONE, YELL | OWTAN | | | - 704b/9- | | |
| 85 91 | SHALE, THN | 6 1 | | | | | |
| 91 105 | LIMESTONE, HID | <i>@ 93</i> | | | | | |
| 105 137 | SHALE CLAYTOR | ED | | | - 17 To 18 T | | |
| 137 145 | LIMESTONE, GRAV | PL H20 | | | | | |
| 145 155 SHA4E, CRAY | | | | | | | |
| 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) .7./.19/.18 and this record is true to the best of my knowledge and belief. | | | | | | | |
| Kansas Water Well Contractor's License No | | | | | | | |
| under the business name of ASSOCHATED DATILIAN TWI by (signature) by (signature) INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top | | | | | | | |
| INSTRUCTIONS: U | se typewriter or ball point pen. <u>PLE</u> | ASE PRESS FIRMLY and PR | INT clea | rly. Please fill in | blanks, underline or circle the c | correct answers. Send top | |
| three copies to Kansas Department of Health and Environment, Burcau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at | | | | | | | |
| http://www.kdheks.gov/waterwell/index.html. | | | | | | | |