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	WATER	WELL RECORD	Form WW	C-5 KSA 82a-12	212 ID No		
1 LOCATION OF WATER WELL:	Fraction			Section Number	Township Numbe	r Range	e Number
County: Gove	NE ¼	SE 1/4	NE ¼	31	т 11 :	S R	26 W
Distance and direction from nearest town I-70 & Castle Rock Road	or city street addre	ess of well if loo	cated within ci	ty?			
	Coastal Mart	#2506					
RR#, St. Address, Box # :	9 Greenway I	Plaza			Board of Agriculture	a. Division of Wat	er Resources
City, State, ZIP Code :	Houston, TX	77046				-	
3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:	DEPTH OF CO	MPLETED WE	LL	77 ft. ELEV	ATION:		
1	epth(s) Groundwa	ater Encountere	ed 1	ft.	2	ft. 3	ft.
					urface measured on mo		
					. after he		
E E					. after ho		
1	ore Hole Diamete	r 8.5 i	n. to	77	ft. and	in. to	ft.
SWV				ater supply	8 Air conditioning	11 Injection	well
↓ 					9 Dewatering		
S) 10 Monitoring well		
Įv	Vas a chemical/ba	cteriological sa	mple submitte	ed to Department? \	Yes No X	lf yes, mo/day/yr	sample was
	ubmitted			Wat	er Well Disinfected? Y	es N	No X
5 TYPE OF BLANK CASING USED:		5 Wrought Iro	n 8 0	Concrete tile	CASING JOINTS:	Glued (Clamped
1 Steel 3 RMP (SF	₹)	6 Asbestos-C	ement 9 (Other (specify below	v)	Welded	
2 PVC 4 ABS		7 Fiberglass				Threaded	Flush
Blank casing diameter 2	n. to 75	ft., Dia		in. to	ft., Dia	in. to	ft.
Casing height above land surface Flu	shmount in.	, weight	0.703	lbs./ft. \	Wall thickness or gaug	e No. So	ch. 40

				•	Air Sparge	,
3	Was a chemical/bacte	eriological sample sub		t? Yes No X I	lf yes, mo/day/yr sample v ′es No X	vas
5 TYPE OF BLANK CASING USED:		Wrought Iron			Glued Clamped	
1 Steel 3 RMP	(SR) 6	Asbestos-Cement	9 Other (specify be	elow)	Welded	
2 PVC 4 ABS	7	Fiberglass			Threaded Flush	
Blank casing diameter 2	in. to 75	ft., Dia	in. to	ft., Dia	in. to	ft.
Casing height above land surface	lushmount in., v	weight 0.7	703 lbs./f	t. Wall thickness or gaug	e No. Sch. 40	
TYPE OF SCREEN OR PERFORATIO	N MATERIAL:			10 Asbestos-		
1 Steel 3 Stainle	ess steel 5	Fiberglass	8 RMP (SR)	11 Other (spe	ecify)	
		Concrete tile		12 None use		
SCREEN OR PERFORATION OPENIN	IGS ARE:	5 Gauzed	wrapped	8 Saw cut	11 None (open ho	le)
1 Continuous slot 3	Mill slot	6 Wire wra	apped	9 Drilled holes		
2 Louvered shutter 4	Key punched	7 Torch cu	ut	10 Other (specify)		
SCREEN-PERFORATED INTERVALS:	From 75	ft. to	77 ft.	From		ft.

2 PVC		_													Threa			
Blank casing	diameter	2	in.	to7	75	ft., Dia	a		in.	to		ft., C	Dia			in. to)	ft.
Casing heigh	ht above land	surface	Flus	hmount	in.,	weight		0.70	3		lbs./ft	. Wall th	<u>ic</u> kne	ss or gau	uge No.		Sch. 4	0
TYPE OF SO	CREEN OR PI	ERFORA	TION M	ATERIAL:										Asbesto				
	el			steel	5	Fibergla	ass											
	SS	4 Ga	alvanize	d steel	6	Concre	te til	le	9	ABS			12	None us	sed (ope	n hol	le)	
SCREEN OF	R PERFORAT	ION OPE	NINGS	ARE:				Gauzed wra							•	11 I	None (open l	hole)
1 Con	itinuous slot	- 1	3 Mill	slot				Wire wrapp					rilled	holes				
	vered shutter												ther ((specify)				
SCREEN-PE	ERFORATED	INTERVA	ALS:	From	75	f	t. to		77	. 	ft.	From			ft. to			ft.
GRA	VEL PACK IN	ITERVAL	.S:	From	72	f	t. to		77		ft.	From			ft. to)		. ft.
				From		f	t. to	1			ft.	From			ft. to)		ft.
6 GROUT	MATERIAL:	1 Ne	eat ceme	ent	2 Ce	ment gro	ut		3 Be	ntonite		4 Oth	er					
	als From																	
What is the r	nearest source	of possii	ble conta	amination:													ned water we	
ł						7	Р	it privy									Gas well	
2 Sev	ver lines		5	Cess pool				ewage lagoo				•					pecify below	')
	tertight sewer			Seepage p				eedyard				cticide s	_			,		•
Direction from	m well?							•				y feet?	•					
FROM	TO	CODE		LITH	OLOG	IC LOG		F	ROM		то	Ī		PLUG	GING IN	TER	VALS	
0	0.5		Conc															
0.5	1		Clay															
1	25		Silty															
25	26.5			y Sand														
26.5	35		Sand															
35	40		Claye	y Sand														

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was

r the business name of Geotechnical Services, Inc. by (signature)

INSTRUCTIONS:. Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W

Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

and this record is true to the best of my knowledge and beliefy Kansas

This Water Well Record was completed on (morday/yt)

40

50

71.5

50

71.5

77

completed on (mo/day/yr)

under the business name of

Water Well Contractor's License No.

Sand

Sand

Sandy Clay

10-19-05

531