| WAT | TER WELL RE | CORD | Form | WWC-5 | Division of Wat | er Resources; App. No | | |
|--|--|---------------------------------|---------------|----------------------------|----------------------------|------------------------------------|---------------------------|--|
| | | TER WELL: | Fraction | | Section Number | 1 1 | | |
| | ounty: Ottaw | | SE/4 | | 5 | T 12 S | R _{2W} E/W | |
| D | istance and direction | n from nearest town or cit | y street add | lress of well if | | | egrees, min. of 4 digits) | |
| located within city? 584 N. 190th | | | | | Latitude: | | | |
| 2 WATER WELL OWNER: Ray Swearington | | | | | Longitude: | | | |
| R | R#, St. Address, Bo | 0x # : 584 N. 190 | Oth | | Datum: | | | |
| | City, State, ZIP Code | | | 67422 | Data Collection | Method: | | |
| 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL52 | | | | | | | | |
| | OCATION | 4 DEI III OI COM | LETED V | | | • | | |
| W | WITH AN "X" IN Depth(s) Groundwater Encountered (1)1.7 ft. (2) ft. (3) ft. | | | | | | | |
| S | SECTION BOX: WELL'S STATIC WATER LEVEL 17 ft. below land surface measured on mo/day/yr.1.1./.08./.0.6 | | | | | | | |
| ļ | Pump test data: Well water was | | | | | | | |
| | WELL WATER TO BE USED AC. 5 Public water symply 9 Air conditioning 11 Injection well | | | | | | | |
| w | 1. Demostic 2. Feedlet (Oil feel leaves and leaves and leaves (Proping Leaves) | | | | | | | |
| '' | * | 2 Irrigation 4 Indu | | | | | | |
| _ | SW SE W | | | | | | | |
| | | | | | | | | |
| - | Sample was submitted | | | | | | | |
| 5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Gluedx Clamped | | | | | | | | |
| 3 13 | | | ron Cement | 9 Other (specif | CASIN v below) | | x Clamped | |
| | 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded | | | | | | | |
| Blank casing diameter | | | | | | | | |
| Casing height above land surface1.4in., Weight1.60lbs./ft. Wall thickness or guage No.SDR2.6 | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | |
| 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | |
| 1 Continuous slot 3 Mill slot 2025 Guazed 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 | | | | | | | | |
| GRAVEL PACK INTERVALS: From25 | | | | | | | | |
| From | | | | | | | | |
| CONCUMPATION AND ADDRESS OF THE PROPERTY OF TH | | | | | | | | |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other | | | | | | | | |
| 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 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 | | | | | | | | |
| FRO | | LITHOLOGIC | | How ma | | <u>re⊥d∵none∴ap</u> PLUGGING IN | parent | |
| 0 | | | | FRO | VI IO | r Lodding in | TERVALS | |
| 9 | | op Soil Brown S and Fine Tan | | | | | - | |
| 5. | | nale Grav | | | | | | |
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| | | | | | | | | |
| 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)1.1 / 0.8./.06. and this record is true to the best of my knowledge and belief. | | | | | | | | |
| Kansas Water Well Contractor's License No3.88 This Water Well Record was completed on (no day/year) 11.115.106 under the business name of Pestinger Pump Service by (signature) by (signature) INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks anderline or circle the correct answers. Send top | | | | | | | | |
| INST | RUCTIONS: Use type | writer or ball point pen PLEA | mp Ser | Vice RMLY and PRINT cle | early. Please fill in blan | ks anderline or circle th | orrect answers. Send ton | |
| three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Ransas 66612-1367. Telephone | | | | | | | | |
| 785-2 | 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.kdhe.state.ks.us/geo/waterwells.