| WATER WELL REC | ORD | Form WWC- | 5 | Division of Wate | er Resources; App. No. | | |
|--|---|---------------------|----------|------------------|------------------------|--|--|
| 1 LOCATION OF WAT | とう | Fraction SW 1/4 N |)W/4 | Section Number | Township Number T 13 S | Range Number R / W E/W | |
| Distance and direction from nearest town or city street address of well if Clabel Positioning Systematics | | | | | | | |
| located within city? | Latitude: | | | | | | |
| \mathbf{C} | | | | Longitude: | | | |
| 2 WATER WELL OWNER: ALICK DAY RR#, St. Address, Box # : 2484 DOWNYCO RD. City, State, ZIP Code : DOWN MYCO RD. | | | | Elevation: | | | |
| RR#, St. Address, Box | # 2488 DO | mmyca, KD. | | Datum: | | | |
| City, State, ZIP Code | SALON | ron, Ks | | Data Collection | Method: | | |
| 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL ft. | | | | | | | |
| I OCATION / | | | | | | | |
| WITH AN "X" IN SECTION BOX: | (-)···································· | | | | | | |
| | Full p lest data: Well water was | | | | | | |
| Est. Yieldgpm: Well water wasft. afterhours pumpinggg WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well | | | | | | | |
| 1 Domostic 2 Foodlet (Oil 6-14 | | | | | | | |
| W X E | 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well | | | | | | |
| | | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs | | | | | | | |
| Sample was submitted | | | | | | | |
| S | | | | | | | |
| 5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped | | | | | | | |
| 1 Steel 3 RMP | | -Cement 9 Other | (cpecifi | below) | | Clamped | |
| 2 PVC 4 ABS | | | (specify | (delow) | Threaded | •••••••••••••••••••••••••••••••••••••• | |
| 2 PVC 4 ABS 7 Fiberglass Threaded Threaded In to 3 ft Diameter in to 5 | | | | | | | |
| Blank casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface in., Weight land surface in., Weight wall thickness or guage No. 50 R 26 | | | | | | | |
| TYPE OF SCREEN OR P | ERFORATION MATE | ERIAL: | | | orange in gauge inc | | |
| 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) | | | | | | | |
| 2 Brass 4 Galv | ranized Steal 6 Cond | crete tile 8 RM (SR | .) 10. | Asbestos-Cement | 12 None used (open | hole) | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | |
| 1 Continuous slot 3 Mill slot 225 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 | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From | | | | | | | |
| From | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | |
| From ft. to ft., From ft. to ft. | | | | | | | |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other | | | | | | | |
| Grout Intervals: From | | | | | | | |
| 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 | | | | | | | |
| Direction from well? | | | | | <u></u> | | |
| FROM TO | LITHOLOGIC | CLOG | FROM | I TO | PLUGGING INT | ERVALS | |
| | NDY LOOM | TAN | | | | | |
| | AY BROWN | | | | | | |
| | US FINE TO | MED. TAD | | | | | |
| 4x Ch | AY GRAY | | | | | | |
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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) and this record is true to the best of my knowledge and belief | | | | | | | |
| Kansas Water Well Contractor's License No. 1. This Water Well Record was completed on (mo/day) (ear) 0.4-27-09 | | | | | | | |
| under the business name of PEST NGEN PUMP SER, by (signature) August 18 18 18 18 18 18 18 18 18 18 18 18 18 | | | | | | | |
| 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 corect answers. Send top three copies to Kansas Department of Health and Environment, Bureau 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. | | | | | | | |