		* *	WATE	R WELL RECORD	Form WWC-5	KSA 82	a-1212		
1 LOCATION		ER WELL:	Fraction		Sec	tion Number	Township Number	Range Number	
County:		Russell	NW 1/4		NW 1/4	2	T 14 S	R 14 B(W)	
Distance and direction from nearest town or city street address of well if located within c							Amoco #96	89	
70' Southeast from center of station door, I-70 and U.S. 281, Russell, KS 52895061 MW-4								MW-4	
2 WATER	R WELL OW	NER: Amoco Oil	Company				1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A		
RR#, St. Address, Box # : 8700 Indian Creek Parkway, Bidg. 3, Suite 180 Board of Agriculture, Division of Water Resources									
City, State, ZIP Code : Overland Park, KS 66210 Application Number:									
LOCATE WELL'S LOCATION WITH 4 DEPTH OF COMPLETED WELL 29.0 ft. ELEVATION: Approx. Surface Elev: 1825									
AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1 23 ft. 2 ft. 3 ft.									
								12/16/89	
1	- 1 1	; \\							
-	Pump test data: Well water was ft. after hours pumping gpm								
X	X Est. Yield . N/A gpm: Well water was hours pumping gpm								
wie w	W I Bore Hole Diameter								
₹ "	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well								
ī L	- sw	SE	1 Domestic	3 Feedlot				12 Other (Specify below)	
	- 317	3	2 Irrigation	4 Industrial	7 Lawn and o	garden only	10 Monitoring well		
1 1	ii	ı l w	as a chemical/	bacteriological sample	submitted to D	epartment? Y	'es; If	yes, mo/day/yr sample was sub-	
		mi	itted			Wa	ater Well Disinfected? Ye	s No X	
5 TYPE C	OF BLANK C	ASING USED:		5 Wrought iron	8 Concre	ete tile	CASING JOINTS: (Glued Clamped	
 1 Ste	el	3 RMP (SR)		6 Asbestos-Cement	9 Other	(specify belo	w) \	Welded	
2 PV	'C	4 ABS		7 Fiberglass				Threaded X	
Blank casing diameter									
Casing height above land surface4									
-	-	R PERFORATION N		,	7) PV		10 Asbestos-	1	
1 Ste		3 Stainless st		5 Fiberglass		IP (SR)		ecify)	
2 Bra		4 Galvanized		6 Concrete tile	9 AB		12 None used	- '	
						3		' '	
	ntinuous slo				wrapped		9 Drilled holes		
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)									
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									
				ft., From!9	.• 2 ft.				
What is the	e nearest so	urce of possible co	ntamination:			_		14 Abandoned water well	
1 Se	ptic tank	4 Lateral I	lines	7 Pit privy	Pit privy		storage 15 Oil well/Gas well		
2 Sewer lines 5 Cess pool 8 Sewage lag						12 Fertilizer storage 16 Other (specify below)			
3 Wa	atertight sew	er lines 6 Seepage	e pit	9 Feedyard		13 Inse	cticide storage		
Direction f	rom well?	North				How ma	any feet? 10		
FROM	то		LITHOLOGIC	LOG	FROM	то	PLUGGII	NG INTERVALS	
00	.5	Concrete	· · · · · · · · · · · · · · · · · · ·				- 1 A A W A W ' ' ' ' ' '		
•5	1.5	Fill: Dark	Brown Lean	Clay/Sand					
1.5	13.0	Red-Brown Le	ean to Fat	Clay					
13.0	18.0	Gray-Brown L	ean to Fat	Clay/Calcareous	Nodu i es			100 man	
18.0	24.5	Gray-Brown L	ean Clay w	ith Sand					
24.5	29.0	Gray-Brown C	•						
			•						
								A STATE OF THE STA	
		A. Life A. Wallet							
					- 				
<u> </u>	<u> </u>					L			
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)									
Water Well Contractor's License No 416 This Water Well Record was completed on (mo/day/yr)									
	business na			n Consultants, In		by (signa		Mobile	
INSTRU	JCTIONS: Use t	ypewriter or ball point pen	n. PLEASE PRESS	FIRMLY and PRINT clearly.	Please fill in blanks	, underline or circ	cle the correct covers and top	wed copies to Kansas Department	
of Heal	Ith and Environn	nent, Bureau of Water, To	peka, Kansas 666	20-7320. Telephone: 913-296	-5545. Send one to	WATER WELL	OWNER and retain one for your	records.	