| WATER WELL RI | ECORD | Form WWC- | ·5 | Division of | Water Resources; Ap | p. No. | |
|---|---|-----------------------------|--------------|--------------------|------------------------|-----------|--------------------------|
| 1 LOCATION OF W County: SAL | | Fraction NE 1/4 SW 1/4NE | 1/4 | Section Numb | | umber | Range Number R 3W E/W |
| Distance and direction from nearest town or city street addre | | | | Global Position | oning Systems (dec | cimal de | grees, min. of 4 digits) |
| located within city? 840 MANOR RD. | | | | Latitude: | | | |
| 2 WATER WELL OWNER: RAY PACK | | | | Elevation: | | | |
| RR#, St. Address, Box # : 840 MANOR RD. | | | | Datum: | | | |
| City, State, ZIP Coo | | | | Data Collect | ion Method: | | |
| 3 LOCATE WELL'S | | LETED WELL . 6.2 | L | | | | |
| LOCATION | be a per in or com | LETED WELL | ••••• | | | | |
| WITH AN "X" IN | Depth(s) Groundwate | r Encountered (1) | 38 | ft. (2). | ft. | (3) | ft. |
| SECTION BOX: | | | | | | | |
| N | Pump test data: Well water was38ft. after1 hours pumping25 g | | | | | | |
| | | m: Well water was | | | | | |
| NW NE | WELL WATER TO I | BE USED AS: 5 Publ | ic water | supply 8 | Air conditioning | 11 Inj | ection well |
| | | edlot 6 Oil field | l water su | ipply 9 | Dewatering | 12 Ot | her (Specify below) |
| | 2 Irrigation 4 In | dustrial 7 Domesti | ic (lawn d | & garden) 10 | Monitoring well | | |
| SW SE | | | | | | | |
| | Was a chemical/bacteriological sample submitted to Department? Yes NoX; If yes, mo/day/yrs Sample was submitted | | | | | | |
| | Sample was submitted | d | Wate | er well disinfect | ted? YesX | No | |
| S | | | | | | | |
| 1 | SUSED: 5 Wrought | | | | | | X Clamped |
| ı | | | | below) | | | |
| <u>2 PVC</u> 4 A | | | | | | | l |
| | 5 in. to5.7. | | | | | | |
| Casing height above land surface1.6 | | | | | | | |
| 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 • 025. 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: From5.7 | | | | | | | |
| From ft. to ft., From ft. to ft. | | | | | | | |
| 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 wll/gas well | | | | | | | |
| | SOUTH | | | | | | |
| FROM TO | LITHOLOGI | | FROM | | PLUGGIN | | |
| | ILL DIRT | | | | | | |
| 2 36 C | LAY BROWN SILT | Y | | | | | |
| 36 62 S | AND FINE TO CO. | ARSE TAN CLEA | N | | | | |
| 62 C | LAY 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) 04-07-06 and this record is true to the best of my knowledge and belief. | | | | | | | |
| Kansas Water Well Contractor's License No. 3.88 This Water Well Record was completed on (mg/dg//year) 9.4-29-0.6 | | | | | | | |
| | ne of PESTINGER P | | | y (signature) | | | lung |
| 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 correct angular section of the 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- | | | | | | | |
| copies to Kansas Department | t of Health and Environment, Bu | ureau of Water, Geology Sec | ction, 1000 | SW Jackson St., St | uite 420, Topeka, Kans | as 66612- | ·1367. Telephone 785- |
| 290-3322. Send one to WAT | TER WELL OWNER and retain | one for your records. Fee o | 101 UU.C¢ 10 | each constructed v | ven. | | |