| V _s | PU b | N#1 | \ M Å⊤F | ER WELL RECORD F | orm WWC-5 | KSA 82a | -1919 | | | |
|---|-----------------------------|---|------------------|----------------------------|----------------|--|---------------------|-----------------|---------------------|--|
| | | TER WELL: | Fraction | IN WELL RECORD | | tion Number | Township | Number | Range Nu | mber |
| ⊢ | | FORD | 5W 1/2 | SE 14 5E | 1/4 | 4 | T 2 | | R // | EM |
| Distance ar | nd direction | from nearest town | or city street a | address of well if located | within city? | | | | | |
| HU | 1D501 | 1 6E1 | ON 7 | 14E N.S. | | | | | | |
| | | NER: L.D. DI | | | | LARA RU | GAN, EL | INWOOL | 2K5 | |
| | | x# : Rt. 1 B | | | | | , | | Division of Water | Resources |
| | | | | KS 67530 | | | Applicati | on Number: | T84-75 | 16 |
| 3 LOCATE | WELL'S L | OCATION WITH 4 | DEPTH OF | COMPLETED WELL | 75 | ft ELEVA | | | | |
| AN "X" I | IN SECTIO | y BOX: | epth(s) Ground | dwater Encountered 1. | 2 | 5/ ft 2 | 50 | ft. | 3 | ft. |
| T | 1 | | | WATER LEVEL | | | | | | |
| | l . | | | | | | | | | |
| Pump test data: Well water was ft. after hours pumping gpm Est. Yield gpm; Well water was ft. after hours pumping gpm | | | | | | | | | | |
| | 1 | | | eter . 7 8. in. to | | | | - | | |
| • w - | | | | • | • | | 8 Air conditioning | | Injection well | |
| - | i | " | 1 Domestic | | | | | - | Other (Specify be | elow) |
| - | - SW | SE | 2 Irrigation | | | | Observation v | | (Opecity b | |
| | ! | w | • | bacteriological sample su | | | | | | |
| t L | | | itted | bacteriological sample su | Diffilled to D | - | ter Well Disinfec | | No No | e was sub |
| 5 TYPE O | E BI ANK (| CASING USED: | illeu | 5 Wrought iron | 8 Concr | | | | ed . X. X. Clampe | nd . |
| l 1 Ste | | 3 RMP (SR) | | 6 Asbestos-Cement | | (specify below | | | ded | |
| | | 4 ABS | | | | | • | | aded | |
| 2 PV | ے ام | | 56 | _ 7 Fiberglass ft., Dia | | | | | | |
| Cooing hoi | abt obove i | and surface | 12 | .in., weight | | ، | II., Dia | | 111. 10 | · · · · · · · · · · · · · · · · · · · |
| | | | | .in., weight | | | | | , | |
| i | | R PERFORATION N | | E Eiberglese | 7 <u>PV</u> | | _ | sbestos-cem | | |
| 1 Ste | | 3 Stainless st | | 5 Fiberglass | | IP (SR) | | ` |) | |
| 2 Bra | | 4 Galvanized | | 6 Concrete tile | 9 AB | 5 | | one used (o | • | 5-1-V |
| | | RATION OPENINGS | | | l wrapped | | 8 Saw cut | | 11 None (open | noie) |
| | ntinuous slo | | | 6 Wire w | | | 9 Drilled holes | | | |
| ı | vered shut | | punched | 7 Torch o ft. to | | | 10 Other (spec | ıту) | | |
| SCHEEN-P | EHFORATI | ED INTERVALS: | From | | | | | | | |
| _ | DAVEL DA | CK INTERVALS: | From | ft. to | 76 | π., Fror | n | π. | to | π. |
| " | INAVEL FA | OR INTERVALS. | From | ft. to | ./ | IL., FIOI | П | , Il. | to | |
| 6 GROUT | MATERIAL | : 1 Neat cem | | ft. to 2 Cement grout | | | n Other | | to | |
| | | | | ft., From | | | | | | |
| | | ource of possible co | | | 14. | | | | | |
| 1 | | • | • | , • , , | | | ock pens | | Abandoned water | well |
| 1 Septic tank 4 Lateral lines 2 Sewer lines 5 Cess pool | | | | 7 Pit privy | | 11 Fuel storage 15 Oil well/Gas well | | | | |
| | | 5 Cess po | | 8 Sewage lagoo | n | 12 Fertilizer storage 16 Other (specify below) | | | | |
| l . | | er lines 6 Seepage | e pit | 9 Feedyard | | | ticide storage | | | |
| Direction from FROM | TO | | LITHOLOGIC | 106 | FROM | How mar | ny feet? | LITHOLOG | 310 1 00 | |
| 7110111 | 8 | FINE SA | | LOG | 1110101 | 10 | | LITTIOLO | alo Lou | |
| 2 | 20 | | | | | | | | | |
| 2/1 | 45 | GAMDY C | LIT 7 | | | l | | | | |
| 115 | | SANDY C | IAV | | | | | | | |
| 45 | 50 | | | | | · | | | | |
| 50 | 75 | GRAVEL | | | | | | | | |
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| <u> </u> | | | V-244 | 5.4.40A | | | | | | |
| 7 CONTR | ACTOR'S | OR LANDOWNER'S | CERTIFICAT | ION: This water well was | (1) constru | cted, (2) reco | nstructed, or (3) | plugged un | der my jurisdiction | n and was |
| completed | on (mo/day | /year) | 1.0 | 1.3-84 | | and this reco | rd is true to the I | est of my kr | nowledge and beli | ef. Kansas |
| Water Well | Contractor | s License No | 3. 8. 9. | This Water We | I Record wa | is completed of | on (mo/day/yr) | <i>I.O</i> . : | 7.6.8.4 | |
| under the b | ousiness na | me of RE15EM | WATET | E PRESS FIRMLY and | INC | by (signat | ure) / Texal | oph | Mees | <u>, </u> |
| INSTRUCT | TIONS: Use | typewriter or ball poi | nt pen, PLEAS | SE PRESS FIRMLY and | PRINT clear | ly. Please fill ir | blanks, underlin | ne or circle th | correct answers | Send top |
| OWNER at | ธ เอ Kansas nd retain or | Department of Healt ne for your records. | n and Environ | ment, Division of Environm | ent, Environ | mental Geolog | y Section, Topel | a, no 66620 | . send one to WA | ER WELL |
| | | , | | | | | | | | |