| XXX A GIORNI | 15 XX/75/1 | I DECODD | Form W | WC 5 | n: | vision of Wata | r Resources App. N | 25403.02 | |
|---|------------|----------------|-------------------|----------------|---------|--|--------------------|---|--|
| | | LL RECORD | Fraction Form vv | WC-3 | | on Number | Township No. | Range Number | |
| 1 | | OF WATER WELL: | | / 1/ NIVA/ 1/. | Section | 28 | T 21 S | R 20 □E ☑W | |
| County: Pawnee | | | | | Claba | | | | |
| Street/Rural Address of Well Location; if unknown, distance & direction | | | | | | Global Positioning System (GPS) information: Latitude: | | | |
| from nearest town or intersection: If at owner's address, check here . | | | | | | Longitude: (in decimal degrees) | | | |
| 14 West of Burdett | | | | | | Elevation: | | | |
| 14 VOCO1 OF CONDETT | | | | | Detar | Datum: WGS 84, NAD 83, NAD 27 | | | |
| 2 WATER WELL OWNER: Ruff Farms Inc. | | | | | | Collection Method: | | | |
| RR#, Street Address, Box #: 39344 SE O Road | | | | | | GPS unit (Make/Model:) | | | |
| CITY OF TAXABLE PROPERTY. | | | | | | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey | | | |
| City, State, ZIP Code : Hanston, Ks. 67849 | | | | | | | | 5-15 m, \square >15 m | |
| 3 LOCATE WELL WITH AN "X" IN SECTION BOX: N SECTION BOX: N WELL'S STATIC WATER LEVEL. 49.1/2 ft. below land surface measured on mo/day/yr. 7-11-11. Pump test data: Well water was ft. after hours pumping gpm EST. YIELD. N/A gpm. Well water was ft. after hours pumping gpm Bore Hole Diameter 10 in. to .91 ft., and in. to ft. WELL WATER TO BE USED AS: Public water supply Geothermal Injection well Domestic Feedlot Oil field water supply Dewatering Other (Specify below) Was a chemical/bacteriological sample submitted to Department? Yes No 1 Type OF CASING USED: Steel PVC Other Welded Threaded | | | | | | | | | |
| Casing diameter .5 | | | | | | | | | |
| Casing height above land surface. 18 in., Weight SDR-26 lbs./ft., Wall thickness or gauge No. | | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | | |
| Steel Stainless Steel PVC Other (Specify) | | | | | | | | | |
| Brass Galvanized Steel None used (open hole) | | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | |
| Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole) | | | | | | | | | |
| Louvered shutter Key punched Wire wrapped Saw cut Other (specify) | | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From 91 ft. toft., From | | | | | | | | | |
| From | | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | | |
| From | | | | | | | | | |
| 6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | |
| What is the nearest source of possible contamination: | | | | | | | | | |
| Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below) Sewer lines Cessnool Sewage lagoon Fuel storage Abandoned water well | | | | | | | | ier (specify below) | |
| Sewer lines Cesspool Sewage lagoon Fuel storage Watertight sewer lines Seepage pit Feedyard Fertilizer storage | | | | | | ☐ Abandoned ☐ Oil well/ga | | | |
| اللا ا | watertig | m well West | n Leedyard | | from we | On wen/ga | 10 WOII | •••••• | |
| FROM | TO | LITHOLOG | | FROM | TO | | | JGGING INTERVALS | |
| | 3 | | IC LOO | INOM | | LIIIO, L | CO (COME) OF THE | III I III TALLED | |
| 0 | | Top soil | | + | | | | | |
| 3 | 29 | Brown clay | | | | | | | |
| 29 | 34 | Gray clay | | | | | | | |
| 34 | 46 | Sand & gravel | | | | | | *************************************** | |
| 46 | 50 | Gray clay | | | | | | | |
| 50 | 61 | Sand & gravel | | - | | | | | |
| 61 | 91 | Sandstone | | | | | | | |
| | | | | + | | | | | |
| | ļ | | THE STREET STREET | | | and the second s | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☐ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo/day/year) .7.11.11 | | | | | | | | | |
| INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies | | | | | | | | | |
| (white, blue, pink) 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 copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html. | | | | | | | | | |
| KSA 82a-1212 Check: X White Copy, Blue Copy, Pink Copy | | | | | | | | | |