| | | WATER | WELL RECORD | Form WWC-5 | KSA 82a | -1212 | |
|---|----------------------|------------------|---|--------------------|---------------|---|---|
| 1 LOCATION OF WATER W | | , | NTE C | | n Number | Township Number | Range Number |
| County: Pawnee | SE | 74 | NE 1/4 SI | W 1/4] | .4 | T 22 S | R 15 Kw |
| Distance and direction from n 3 south of larne | | ity? XX | 7 east & | Street addres | ss of well if | located within city? | |
| 2 WATER WELL OWNER: | John E | lackwel | .1 | | | | |
| RR#, St. Address, Box # : | Route | 2 | | | | Board of Agriculture | e, Division of Water Resources |
| City, State, ZIP Code : | Larned | l, KS 6 | 7550 | | | Application Number | : Not required |
| 3 DEPTH OF COMPLETED | WELL 60 | ft. Bo | re Hole Diameter | 9 in. t | 60 | ft., and | in. to ft |
| Well Water to be used as: | | lic water su | | 8 Air condition | | 11 Injection w | |
| 1 Domestic 3 Feedlot | 6 Oil | field water s | supply | 9 Dewatering |) | 12 Other (Spe | cify below) |
| 2 Irrigation 4 Industria | l 7 Law | n and gard | en only | 10 Observation | n well | | |
| Well's static water level | | | | n 2 | | onth26 | . day 1.981 year |
| | | | | | | | |
| Est. Yield Not ck'd | | | | | | hours pumping | |
| 4 TYPE OF BLANK CASING | G USED: | | 5 Wrought iron | 8 Concrete | tile . | Casing Joints: Gl | ued . X Clamped |
| 1 Steel | RMP (SR) | | 6 Asbestos-Cement | 9 Other (s | pecify below | v) Wo | elded |
| 2 PVC | | | 7 Fiberglass | | | Th | readed |
| Blank casing dia5 | in. to . | 50 | | | | | in. to ft |
| Casing height above land sur | | | | | | | |
| TYPE OF SCREEN OR PER | | | | 7 PVC | | 10 Asbestos-ce | |
| 1 Steel 3 | Stainless steel | _ | 5 Fiberglass | 8 RMP | (SR) | 11 Other (speci | fy) |
| | Galvanized ste | | 6 Concrete tile | 9 ABS | | 12 None used (| |
| Screen or Perforation Openin | as Are: | | | zed wrapped | | 8 Saw cut | 11 None (open hole) |
| · · | 3 Mill slot | | | wrapped | | 9 Drilled holes | (0,000,000,000,000,000,000,000,000,000, |
| 2 Louvered shutter | | | 7 Toro | | | | |
| l . | • . | | | | | • | in to |
| Screen-Perforated Intervals: | | | | | | |) |
| Corcon r chorated intervals. | | | ft. to | | | |) |
| Gravel Pack Intervals: | | | | | | |) |
| Annular Fill | From | | | | | ft. to | |
| 5 GROUT MATERIAL: | | | 2 Cement grout | | | | |
| Grouted Intervals: From | | _ | • | | | | ft. to |
| What is the nearest source of | | | II., FIUIII | IL. | | • | |
| _ | • | mnauon. | 7 Cawana la | | | • | Abandoned water well |
| 1 Septic tank 2 Sewer lines | 4 Cess pool | | 7 Sewage lag | goon | | • | Oil well/Gas well |
| | 5 Seepage pit | Į | 8 Feed yard | | | | Other (specify below) |
| 3 Lateral lines | 6 Pit privy | | 9 Livestock p | | | - | vv |
| | | | | | | | XX No |
| Was a chemical/bacteriological | | | | | | | |
| was submitted | | | | | | | |
| If Yes: Pump Manufacturer's | | | | | | | |
| Depth of Pump Intake | | | | | | | • |
| | 1 Submersible | | Turbine | | | | ting 6 Other |
| | | | | | | | under my jurisdiction and was |
| | | | | | | | year |
| and this record is true to the | | | | | | | |
| This Water Well Record was | completed on | 4 | • | | | day | year under the business |
| | . | | | by (signature) | | | |
| LOCATE WELL'S LOCAT WITH AN "X" IN SECTION | ss. 1 | TO | | OGIC LOG | FROM | M TO | LITHOLOGIC LOG |
| BOX: | | 15 | Topsoil & sa | | 1.y | | |
| | 15 | 32 | Sand & grave | | | | *** |
| , , , , , , , , , , , , , , , , , , , | 32 | 34 | Sandy tan cl | | | | |
| | 34 | 40 | Sand & grave | | | | |
| NW NE | 40 | 46 | Sandy tan cl | | | | |
| ₩ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 46 | 60 | Sand & grave | 1, med. | | | 100.000 |
| SW_X SE | | | | | | | |
| 1 1 1 1 - 35 | | | | | | | |
| <u> </u> | | | | | | ` | |
| t 1 Mile | | | | | | | |
| ELEVATION: X unknow | n | | | | | | |
| Depth(s) Groundwater Encou | ntered 1 28 | 3 ft. 2 | ft. 3 | ft. 4 | ft. | (Use a second | sheet if needed) |
| INSTRUCTIONS: Use typewri | iter or ball point o | en <i>please</i> | press firmly and PRII | VT clearly. Please | fill in blank | s, underline or circle the co | rect answers. Send ton three |
| copies to Kansas Department | of Health and Env | rironment, D | ivision of Environmen | it, Water Well Con | tractors, Top | oeka, KS 66620. Send one to | WATER WELL OWNER and |
| retain one for your records. | | | | | | | |