WATE	R WELI	L REC	CORD		Form WW	C-5	Divisio	n of Wate	r Resources; A	.pp. No. L	20000301
1 LOC	LOCATION OF WATER WELL:			Fraction	Section Number   Township Number   Range Number						
Coun	County: Pawnee			N <sub>2</sub> xx NE 1/4	SE 1/4	1		T 22 S		R 16 XW	
			from nearest	town or ci	Global Positioning Systems (decimal degrees, min. of 4 digits)						
1	ed within c		Hom nearest	town of Ci	ty street address of	Well II	Latitude	_	•		
			Foot of I	oran o d							
3/4 South, 3½ East of Larned WATER WELL OWNER: Carmen Schmitt					T / T D	1	Longitud	ie:			
							Elevation	n:			
			x # : P.O. I		/ 919 W.I		Datum:				
City,	, State, ZIF	• Code	: Great	Bend, Ks	/ Larned,	∟Ks.	Data Col	llection 1	Method:		
2 100	ATE WE	I I 'S	4 DEPTH	6/230 F COMI	PLETED WELL.	50					
	ATE WE	ט ענו	4 DEI III (	or Comi	LEIED WEEL.		-d	It.			
		TAT	D = = 41. (=) C ==	1	Τ	`	C.	(2)	Δ	(2)	Ω
1	H AN "X"		Deptn(s) Gro	oundwater	Encountered (1	)	π.	(2)	It.	(3)	,IL.
SEC	TION BO	X:	WELL'S ST	ATIC WA	ATER LEVEL	12ft	below lan	d surface	measured on	mo/day	/yr.a=22=ub
	N				: Well water was						
	Est. Yield. N.Agpm: Well water wasft. after hours pumping										
l l	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well										
$ \mathbf{w} ^{-1}$											her (Specify below)
X 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well											
Was a chemical/bacteriological sample submitted to Department? Yes NoX; If yes, mo/day/yrs											
Sample was submitted											
			Sample was	Submitted	• • • • • • • • • • • • • • • • • • • •	···· wan	or well dist	meeted:	103 4444	110	••••
	S										
5 TYPE	E OF CAS	ING U	J <b>SED:</b> 5	Wrought	Iron 8 Co -Cement 9 Ot	oncrete tile		CASING	G JOINTS:  C	3lued	X Clamped
1 :	Steel	3 RMI	P (SR) 6	Asbestos-	-Cement 9 Ot	her (specify	below)		V	Velded	
1 Z	PVU	4 AD3	) /	T IDEI 21488	·					Threaded	1
Blank ca	sing diame	eter	5 in to	65	ft. Diameter		in. to	ft	Diameter		in. toft.
Casing h	eight abox	e land	surface	36	in Weight	SDR-26	lbs /ft	Wall thi	ckness or gua	ige No	
			PERFORATION			ж	.105./10.	***************************************	emiess or gad	igo 110.	
1						0	A DC		11 Other (S	'nacifu)	
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)											
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)											
SCREEN OR PERFORATION OPENINGS ARE:											
1 Continuous slot 3 Mill slot 5 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)											
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)											
From											
GRAVEL PACK INTERVALS: From											
From ft., From ft. to ft.											
6 GRO	UT MATI	ERIAL	: 1 Neat ce	ment 2	Cement grout 3	Bentonite	4 Other	hole 1	olug		
Grout In		Fro	om	ft to	ft. From		ft. to	f	t. From	20	ft. toQft.
			e of possible c						,		
1			•			10 Livest	ock nens	13 Inc	secticide Stor	ane	16 Other (specify
									below)		
1				-	8 Sewage lagoon						None
			lines 6 See				zer Storage		il well/gas we		***************************************
		II?									
FROM	TO		LITI	HOLOGIC	LOG	FROM	1 TO		PLUGGI	NG INT	ERVALS
0	6		e sand								·····
6	14	San	d & grave	L/ sand	v clav						
14	20		dy clay	•							
20	47		d & grave.	1				<u> </u>			
				<u>L</u>				<del>                                     </del>			
47	56	Cla						+			
56	85		d & grave								
85		San	d, gravel	<u>, &amp; cl</u> a	y mixed						
7 CONT	TD A CTO	DIE OT	DIANDOW	JEDIC CI	DTIEICATION.	This water	. well was	(1) 20224	muotad (2) man	onatmici	ted or (2) plugged
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) 8-22-06 and this record is true to the best of my knowledge and belief.											
Kansas Water Well Contractor's License No 134 This Water Well Record was completed on (mo/day/year) 8-25-06											
	e business		of Rosena	crantz-	Bemis	b	y (signatu	re)	ora a	0.100	<b>_</b>
INSTRUC	CTIONS: Us	se typew	riter or ball poin	t pen. PLEA	ASE PRESS FIRMLY ar	nd <u>PRINT</u> clea	rly. Please f	ill in blank	s, underline or c	ircle the co	orrect answers. Send top
	es to Kansas	Departm	ent of Health and	l Environme	nt, Bureau of Water, Ge	ology Section	, 1000 SW Ja	ickson St., S	Suite 420, Topek	a, Kansas	66612-1367. Telephone
785-296-5	522. Send	d one	to WATER W	ELL OWN	IER and retain one	for your r	ecords. Fe	ee of \$5.	00 for each	constructe	d well. Visit us a
http://www	w.kdhe.state.k	s.us/geo	/waterwells.								

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