| Social County Section Number Towasip Number Towas | | WA | ATER WELL REC | CORD For | m WWC-5 | KSA 82a | -1212 ID | No | | | | | | |
|--|---------------------------|----------------------------|---|---|---|--|---|--|--------------------------|--|---|-----------------|------------------|--|
| Distance and direction from nearest bown or only steels address of well 10 footed within city? WATER WELL DOWNER: Feb. M. B. B. | | | | | | | | r To | | | | | | |
| WATER WELL OWNER: 150 Put in Sear 1 His Address Box # 150 Put in Sea 1 His Address Box # 150 Put in Se | | | | | | | 35_ | | 22 | S | R | _5 | E | |
| WATER VIELL OWNER: Tell Was a Chemical/bacteriological sample submitted to Department? Ves. As | Distance and direction | | • | | | • | | | | | | | | |
| RER, St. Address, Box # 1909 Wing Your Board of Agriculus, Division of Water Resources Constitution (S. State, 2006). St. Address, Box # 1909 Will Water West West West West West West West West | | | | gROUT | in | Hytel | ninson | | | | | | | |
| Colly, State, 2TP Code Months Control Name C | | / | | | | | | | | | | | | |
| STATE WELL'S LOCATION WITH STATE DEPTH OF COMPLETED WELL ADQ It SECTION It Depth (a) Groundwise Encountered It Depth (a) Groundwise | , | | | | | | | | • | - | ivision of | Water Re | esources | |
| Depth(s) Groundwater Encountered 1 t. 2 t. 3 t. 4 t. 2 t. 3 t. 5 t. 4 t. 2 t. 3 t. 4 t. 2 t. 3 t. 3 t. 4 t. 2 t. 3 t. 3 t. 4 t. 3 t. 3 t. 4 t. 3 t. 3 | | | | | | 102 | ft. FI FV | <u> </u> | <u> </u> | | | | - | |
| WELL STATIC WATER LEVEL 29 ft. below land surface measured on modaryly | | | \vdash | | | - | | | | | | | | |
| TYPE OF BLANK CASING USED: 1 Sizel 3 RNAP (SR) 6 Asbestos-Cement 7 Fibergiass 1, 10 Interest 1, | NW | NE | WELL'S STATI Pul Est. Yield WELL WATER Domestic | C WATER LE mp test data:gpm: TO BE USED 3 Feedl | WEL | ft. be r was was Public water Dil field wate | low land surfa 3.2 ft. ft. ft. supply er supply | ace measur after after 8 Air co 9 Dewa | ed on mo/o | lay/yr o hours po hours po 11 In 12 O | 2 - 4 umping umping ijection w other (Spe | ell ecify below | gpm gpm w) | |
| 1 Steel 3 RMF (SR) 6 Asbestos-Cement 9 Other (specify below) Welded PPVC 4 ABS 7 Fiberglass Intreaded Interest Steel 5 Fiberglass Interest Steel 5 Fiberglass Interest Steel 5 Fiberglass Interest Steel 5 Fiberglass 1 to 10 Absestos Cement 1 Steel 3 Stainless Steel 5 Fiberglass 8 RMF (SR) 11 Other (Specify) 2 Brass 4 Galvanted Steel 5 Fiberglass 6 RMF (SR) 11 Other (Specify) 11 Other (Specify) 2 Brass 4 Galvanted Steel 5 Fiberglass 6 RMF (SR) 11 Other (Specify) 12 Brass 14 Galvanted Steel 6 Concrete tile 9 ABS 11 Other (Specify) 11 Other (Specify) 11 Other (Specify) 11 Other (Specify) 12 Brass 14 Galvanted Steel 6 Concrete tile 9 ABS 10 Other (Specify) 11 Other (Specify) | SW | | | | | | | | | | | | | |
| Threaded Blank casing diameter 5 in, to 2 in, weight 10 in, to 10 in, weight 10 in, weight 10 in, to 10 in, weight 10 in, weight 10 in, to 10 in, weight 10 in, weight 10 in, to 10 in, weight 10 in, weight 10 in, to 10 in, weight 10 | | | | 3 | | | | | SING JOIN | | • | | | |
| Blank casing diameter | A | | | | | | | | | | | | | |
| Casing height above land surface A in, weight A 2 lbs./ft. Wall thickness or guage No. / 6.0. TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stanless Steel 5 Fibergiass 6 RMP (SR) 11 Other (specify) | | | in to | | | | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass 8 RMP (SR) 11 Other (Specify) 2 Brass 4 Galvanized Steel 6 Concrete tile 9 ABS 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 5 Guzzd wrapped 10 Other (specify) 1 Continuous slot 3 Mill slot 7 Torch cut 11 None (open hole) 2 Louvered shutter 4 Key punched 7 Torch cut 11 None (specify) 5 GREEN-PERFORATED INTERVALS: From 2 1, ft. to 1, ft. From 1, ft. ft. ft. From 1, ft. ft. ft. From 1, ft. ft. From 1, ft. | | | | | | | | | | | | | | |
| 1 Steel 3 Stainless Steel 5 Fiberglass 8 RMP (SR) 11 Other (Specify) 2 Brass 4 Galvanzed Steel 6 Concrete tile 9 ABS 12 None used (open hole) 5 CREEN OR PERFORATION OPENINGS ARE: 5 Guazed wrapped 9 Drilled holes 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 10 Other (specify) 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 10 Other (specify) 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 10 Other (specify) 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 10 Other (specify) 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 10 Other (specify) 11 None (open hole) 1 N | | | | , worg | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | _ | | 100./11. *** | | | | | | |
| 1 Continuous slot 3 Mill slot 6 Wire wrapped 7 Torch cut 10 Other (specify) ft. 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) ft. 5 CREEN-PERFORATED INTERVALS: From 8.1 ft. to 12.9 ft., From ft. to ft. from ft. from ft. to ft. from | 1 Steel 3 Stainless Steel | | | 3 | | 8 RI | 8 RMP (SR) | | 11 Other (Specify | | | y) | | |
| 1 Continuous slot 3 Mill slot 6 Wire wrapped 7 Torch cut 10 Other (specify) ft. 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) ft. 5 CREEN-PERFORATED INTERVALS: From 8.1 ft. to 12.9 ft., From ft. to ft. from ft. from ft. to ft. from | SCREEN OR PERFO | RATION OPENIN | NGS ARE: | 5. Guazed wrapped | | | | (8) Saw | cut | | 11 Non | e (open h | iole) | |
| SCREEN-PERFORATED INTERVALS: From \$2 | | | | | | 9 Drille | ed holes | | | | | | | |
| From | 2 Louvered shutte | er 4 K | | | | | | | | | | | | |
| GRAVEL PACK INTERVALS: From \$2,3 ft. to \$5.5. ft., From ft. to ft. from ft. ft. from ft. from ft. from ft. ft. from ft. ft. from ft. ft. from ft. from ft. ft. from ft. ft. from ft. ft. from ft. from ft. ft. from f | SCREEN-PERFORAT | TED INTERVALS: | | | | | | | | | | | | |
| From 60 | GRAVEL DA | ACK INITEDVALS | From | 23 | ft. to | <i></i> | ft., Fror | n | ••••• | ft. to | | | ft. | |
| GROUT MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other | GRAVELFA | ACK INTERVALS. | From | 60 | ft. to | 104 | π., Fror ft Fror | n n | ••••• | ft. to | | | ft. | |
| Grout Intervals: From | | | | | | **** | | | | | | | | |
| What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) Waterlight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage How many feet? FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS O 6 Sandy & S./// 6 1/ S./// C. C./ay // / / / / / / / / / / / / / / / / / | | | | 2 Cemer | nt grout | | | 4 Other | | | | | | |
| 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) @Waterlight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage Direction from well? S How many feet? FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS O 6 Sandy Br Sylft 6 // Sift Cr Clay // / / / / / / / / / / / / / / / / / | | | | ج ft., Fr | .جـrom | ft. | | | rom | | | | | |
| 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage How many feet? 10 FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS O | • | | | | | | ' | | | | | | | |
| Direction from well? S ENDIRECTION TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS DIVERTING TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS DIVERTING TO SANDY BY SILTY LITHOLOGIC LOG FROM TO PLUGGING INTERVALS DIVERTING TO PLUGGING INTERVALS DESCRIPTION TO PLUGGING INTERVALS DESCRIPTION TO PLUGGING INTERVALS DIVERTING TO PLUGGING INTERVALS PLUGGING INTERVALS PLUGGING INTERVALS DIVERTING TO PLUGGING INTERVALS PLUGGING INTERVALS PLUGGING INTERVALS DIVERTING TO PLUGGING INTER | • | | | • • | | | | | | | | | | |
| Direction from well? S FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 6 Sandy Br S,*/ff 6 1/1 Si*/ff Cr C/ay 1/6 29 F Sand 2/7 3/1 Cr C/ay 3/1 42 F Sand 42 5-3 Cr C/ay 5-3 66 Br + Cr C/ay 66 80 F Sand Smy Layers C/ay 66 80 F Sand Smy Layers C/ay 67 101 F Sand 101 10 Y Br Y Cr C/ay 101 10 Y Br Y Cr C/ay 102 Interval Smy Layers C/ay 103 Interval Smy Layers C/ay 104 Interval Smy Layers C/ay 105 Interval Smy Layers C/ay 106 Interval Smy Layers C/ay 107 Interval Smy Layers C/ay 108 Interval Smy Layers C/ay 109 Interval Smy Layers C/ay 100 Interval Smy Layers C/ay 100 Interval Smy Layers C/ay 101 Interval Smy Layers C/ay 102 Interval Smy Layers C/ay 103 Interval Smy Layers C/ay 104 Interval Smy Layers C/ay 105 Interval Smy Layers C/ay 107 Interval Smy Layers C/ay 108 Interval Smy Layers C/ay 109 Interval Smy | · | | | | | | | 16 C | 16 Other (specify below) | | | | | |
| FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 6 Sandy Br S'ff 6 1/1 S'/fy Cr C/ay 1/1 16 Br C/ay 1/2 F Sand 29 F Sand 31 Y2 F Sand 42 53 Cr C/ay 53 66 Br + Gr C/ay 66 80 F Sand - Snn Layers C/ay 80 101 F Sand 101 109 Br Cr C/ay 101 109 Br Cr C/ay 102 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (Docustructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 1/2 This Water Well Record was completed on (mo/day/yr) 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | | 9 Feedyard | | | | | | | | | | | | |
| O 6 Sandy Br S. 1/4 6 1/1 SI'H Gr Clay 1/1 1/6 Br Clay 1/6 27 F Sand 29 3/1 Gr Clay 3/1 H Sand 3/2 H Sand 4/2 5-3 Gr Clay 5-3 66 Br + Gr Clay 5-3 66 Br + Gr Clay 66 80 F Sand - Snn Layers Clay 80 101 F Sand 1/0/109 Br x Gr Clay CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (Doonstructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Nater Well Contractor's Licence No 1/4/7 This Water Well Record was completed on (mo/day/yr) 2-28-552 INSTRUCTIONS: Use typewriter or bail point pen. PLEASE PLESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St. Suste 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL COWNER and retain one for your | | T | LITHOLOGIC | CLOG | | FROM | | arry reet: | | GING IN | TER\/ALS | | | |
| 6 // Si'th, Gr Clay // 16 29 F Sand 27 3/ Gr Clay 3/ 42 F Sadd 42 53 Gr Clay 53 66 Br + Gr Clay 66 80 F Sand Sm Layers Clay 60 10/ F Sand // 10/ 10 Y Br x Gr Clay CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Occupant of the control of the company of the control of | Λ (| Co. A. | | | | 1110111 | " | | 1 200 | | TENVAL | | | |
| 1/6 | 6 11 | / | | | | | | | | | | | | |
| 1/6 29 F Sand 29 3/1 Gr Clay 3/1 42 F Sand 42 5-3 Gr Clay 5-3 66 Br + Gr Clay 66 80 F Sand - Sm Layers Clay 80 101 F Sand 101 109 Br x Gr Clay CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Doonstructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 1/1/2 This Water Well Record was completed on (mo/day/yr) 2 2 2 2 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 | | | | | | | | | | | | | | |
| 3/ | | | | | | | | | | | | | | |
| ### S 3 Gr C/av 53 66 Br + Gr C/av 66 80 F Sand - Sn, Layer C/ay 80 /0 / F Sand 70 / 10 Y Br × Gr C/ay CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Completed on (mo/day/year) | 29 31 | | | | | | | | | | | | | |
| 53 66 Br + Gr Clay 66 80 F Sand - Sm Layers Clay 80 101 F Sand 101 109 Br + Gr Clay CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Nater Well Contractor's Licence No 47.7 This Water Well Record was completed on (mo/day/yr) 2.20.5 by (signature) by (signature) by (signature) INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your | | F Sa | hd | | | | | | | | | | | |
| 66 80 F Sand Syn Layers (Jay 80 101 F Sand John Layers (Jay 101 10 Y Br x Gr Clay CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Nater Well Contractor's Licence No This Water Well Record was completed on (mo/day/yr) A 20 Sunder the business name of M://or Or///ing by (signature) by (signature) Sunder the properties of the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your | | Gr C/ | | | | | | | | | | | | |
| CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No | 4 4 | Br + C | r'Clay | | | | | | | | | | | |
| CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas water Well Contractor's Licence No This Water Well Record was completed on (mo/day/yr) and the business name of M://or Or///ng by (signature) by (signature) by (signature) by (signature) INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your | | F San | 2-5m | Layers | · Clay | | | | | | | | | |
| CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Nater Well Contractor's Licence No This Water Well Record was completed on (mo/day/yr) 2-20-5 by (signature) by (signature) INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your | | | | • | | | | | | | | | | |
| And this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No | 101 109 | Bryer | - Clay | | | | | | | | | | | |
| And this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No | | | | | | | | | | | | | | |
| And this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No | | | | - | | | | | | | | | | |
| And this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No | 7 CONTRACTOR'S | | DIC OFFICION | TION: This | -1 | - 6 | | | (0) | | | | | |
| Nater Well Contractor's Licence No | completed on (mo/day/ | vear) | -4-05 | TION: This w | ater well wa | is (1) constr | ucted, (2) red and this r | constructed | , or (3) plu | ggea und tof my kn | ier my jui | isdiction | and was | |
| INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your | Water Well Contractor' | s Licence No | 447 | | This Water | Well Record | was complet | ed on (mo/ | dav/vr) | 2-28 | | . Delle | . Karisas | |
| 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 answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your | | | | | | | | | | | | | | |
| and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your | INSTRUCTIONS: Use typ | pewriter or ball point per | n. <i>PLEASE PRESS F</i> | IRMLY and PRINT | Clearly. Please | fill in blanks, un | derline or circle th | e correct answ | ers. Send top | three copies | to Kansas E | Department of | of Health | |
| | and Environment, Bureau | of Water, Geology Sec | ction, 1000 SW Jackso | on St., Suite 420, | Topeka, Kansas | 66612-1367. Te | elephone 785-296 | -5522. Send or | e to WATER V | VELL OWNE | R and retain | one for you | ır | |