| | WATER WELL REC | ORD Form WWC-5 | KSA 82a-1 | 1212 ID No. | | | | | |
|--|--------------------|---------------------------------------|---------------------------------------|--|---------------------------------|--------------------------|----------------------------|--------------|------------|
| LOCATION OF WATER WELL: Fraction | | | | Section Number | | Township Number | | Range Number | |
| County: Reno | | SE 1/2 SW | | 24 | _T 23 | S | R | _4_ | E Ø |
| Distance and direction from neares | | | a within city? | | | | | | |
| | | Burrton dicel | · · · · · · · · · · · · · · · · · · · | | | | | | |
| RR#, St. Address, Box # : | 1111 | Crockett CT | _ | | Board of A | ariculture F | Division of V | Nater Ro | esources |
| City, State, ZIP Code : S | outh Lake | TX 76093 | ζ | | Application | | | 74101 111 | |
| 3 LOCATE WELL'S LOCATION WI | | COMPLETED WELL | 6.2 | | ON: | | | | |
| AN "X" IN SECTION BOX: | Depth(s) Groun | ndwater Encountered | 1 | ft. 2 | 2 | ft. 3 | | 2 06 | ft. |
| | WELL'S STATI | C WATER LEVEL/ mp test data: Well wat | Oft. belo | w land surface | measured on mo | o/day/yr hours n | umping | 75 | anm |
| | Est. Yield | gpm; Well wat | er was | ft. af | ter | hours p | umping | | gpm |
| - - | WELL WATER | | Public water s Oil field water | | 8 Air conditioning 9 Dewatering | • | njection we Other (Spec | | w) |
| w 1 1 1 | E 2 Irrigation | | | | Monitoring well | | ٠. | • | • |
| 1 1 | | | | | | | | | |
| SW SE | Was a chemica | al/bacteriological sample | e submitted to [| | | | no/day/yrs | | |
| | mitted | | | Wat | er Well Disinfect | ed? (Yes) | | No | |
| S | | | | | | | | | |
| 5 TYPE OF BLANK CASING USED: | | 5 Wrought iron | | | | G JOINTS: Glued Clamped | | | |
| 1 Steel 3 RMP (SR) 22PVC 4 ABS | | 6 Asbestos-Cement 7 Fiberglass | | 9 Other (specify below) | | <u> </u> | | | |
| Blank casing diameter5 | in. to | ft., Dia . | | in. to | ft., Di | a | in. | to | ft. |
| Casing height above land surface . | 12 | in., weight2 | | | os./ft. Wall thickn | ess or guag | ge No ./ ¢ | <u> </u> | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel | | 5 Fiberaless | Fiberglass 8 RMP (SR) | | | bestos-Cenner (Specify | | | |
| 1 Steel 3 Stainless Steel 2 Brass 4 Galvanized Steel | | 5 Fiberglass 6 Concrete tile | | | | ne used (or | | | |
| SCREEN OR PERFORATION OPE | NINGS ARE: | 5 Gua | azed wrapped | | 8Saw cut | | 11 None | (open h | nole) |
| 1 Continuous slot | 6 Wir | 6 Wire wrapped 9 Drilled h | | | | | | , | |
| 2 Louvered shutter | 4 Key punched | 7 Toro | | | 10 Other (specif | • · | | | |
| SCREEN-PERFORATED INTERVA | | ft. to ft. to | | | | | | | |
| GRAVEL PACK INTERVA | ALS: From | 3.3 ft. to | 28 | ft., From | | ft. to | , , | | ft. |
| | From | ft. to | 64 | ft., From | | ft. to | | | ft. |
| | Neat cement | 2 Cement grout | | onite 4 | Other | | | | |
| Grout Intervals: From | ft. to | ft., From | 2.8ft. to | o <i>3.3</i> | ft., From | | ft. to | | ft. |
| What is the nearest source of possible contamination: | | | | 10 Livestock pens | | 14 Abandoned water well | | | vell |
| Septic tank 4 Lateral lines | | 7 Pit privy | | 11 Fuel storage | | 15 Oil well/Gas well | | | |
| 2 Sewer lines 5 Cess pool 3 Watertight sewer lines 6 Seepage pit | | Sewage lagoon 9 Feedyard | | 12 Fertilizer storage13 Insecticide storage | | 16 Other (specify below) | | | |
| Direction from well? | 9 reedya | ıru | | How many feet? 150 | | | | | |
| FROM TO | LITHOLOGIC | C LOG | FROM | TO | | UGGING IN | ITERVALS | | |
| | Gr Clav | | | | | | | | |
| | | + Gravel | | | | | | | |
| | clay | | _ | | | | | | |
| - 4. | and | | | | | | | | |
| 4 | Clay | | | | | | | | |
| | Sand 1 + Sm Gra | | | | F | ECEI | VED | | |
| , , , , , , , , , | 1000000 | <i>coej</i> | | | | | | | |
| | | | | | 0(| 26 | 2004 | | |
| | Pline | | | | 2004 | | | | |
| | | | _ | | BUREAU OF WATER | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 7 CONTRACTOR'S OR LANDOV | NER'S CERTIFICA | ATION: This water well | was (1) constru | uoted (2) recer | etructed or (2) | olugged up | der my juri | ediction | and wor |
| completed on (mo/day/year) | 7-12-0 | Y | | and this rec | ord is true to the b | est of my k | nowledge a | ınd belie | f. Kansas |
| Water Well Contractor's Licence No | 447 | This Wate | er Well Record | was completed | on (mo/day/yr) | 8- | 8-04 | , | |
| under the business name of | Miller D | rilling | | by (s | ignature) | - m | lles | | |

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 records. Fee of \$5.00 for each <u>constructed</u> well.