| | WA ⁻ | ER WELL RECORD FO | orm WWC-5 | KSA 82a-1 | 212 | |
|---|-----------------------------|-------------------------------|------------------|---------------------------------------|---|---------------------------------|
| LOCATION OF WATER WEL | | | 1 | Number 7 | Township Number | Range Number R 4w E/W |
| Distance and direction from nea | rest town or city? | , 44C 74 SW | | | cated within city? | TI TAY LIVE |
| 3e 2½n Yod WATER WELL OWNER: | | er Drlg Co | | | | |
| RR#, St. Address, Box # : | | St Bk Bldg | | | Board of Agricultur | re, Division of Water Resources |
| City State 7IP Code : | Wichita | Va 62202 | | | | er unknown |
| DEPTH OF COMPLETED W | 1511 45 ft | Bore Hole Diameter 8 | in to | 45 | ft. and | in. to ft. |
| Well Water to be used as: | 5 Public water | | 8 Air condition | | 11 Injection | well |
| 1 Domestic 3 Feedlot | 6 Oil field wat | | 9 Dewatering | | 12 Other (Sp | |
| 2 Irrigation 4 Industrial | 7 Lawn and g | | 10 Observation | well | | |
| Well's static water level | ft. below la | nd surface measured on | 11 | mon | _{th} 3.0 | day 78year |
| Pump Test Data | : Well water was | ft. after | | | ours pumping | |
| Est. Yield 65 gp | m: Well water was | ft. after | | h | ours pumping | gpm lilued Clamped |
| TYPE OF BLANK CASING I | JSED: | 5 Wrought iron | 8 Concrete | | Casing Joints: G | lued Clamped |
| 1 Steel 3 F | RMP (SR) | 6 Asbestos-Cement | 9 Other (sp | ecify below) | V | Velded |
| 2 P <u>V</u> C 4 A | ABS | 7 Fiberglass | perglass | | Welded | |
| 3lank casing dia ク | in. to45 | ft., Dia | in. to . | | ft., Dia | ft. |
| Casing height above land surface | ce | in., weight 4.40. | | lbs./ft | . Wall thickness or gaug | ge No SCII 40 |
| | | | - | | | |
| | Stainless steel | 5 Fiberglass | 8 RMP (| SR) | , , | cify) |
| | Salvanized steel | 6 Concrete tile | 9 ABS | | 12 None used | |
| Screen or Perforation Openings | | 5 Gauzed | • • | | 8 Saw cut | 11 None (open hole) |
| 1 Continuous slot | 3 Mill slot | 6 Wire wrapped 7 Torch cut | | 9 Drilled holes 10 Other (specify) | | |
| 2 Louvered shutter | 4 Key punched | | | | | |
| Screen-Perforated Intervals: | From 25 | ft to 45 | ft | From | н., Dia fi . | in to |
| | | | | | | toft |
| | | | | | | to |
| | From | ft. to | | | | to ft. |
| | Neat cement | 2 Cement grout | | | | |
| | | 10 ft., From | ft. to | · · · · · · · · · · · · · · · · · · · | ft., From | ft. to |
| What is the nearest source of p | | | | 10 Fuel sto | | 4 Abandoned water well |
| · | 4 Cess pool | 7 Sewage lagoo | n | | r storage 1 | 5 Oil well/Gas well |
| 2 Sewer lines | 5 Seepage pit | 8 Feed yard | | | | 6 Other (specify below) |
| | 6 Pit privy | 9 Livestock pens | 3 | | ght sewer lines | |
| Direction from well | S.W | w many feet 6.0 | | ? Water W | ell Disinfected? Yes | <u>No</u> |
| Was a chemical/bacteriological | sample submitted to D | epartment? Yes | | <u>No</u> . | | |
| was submitted | | day | year: Pur | np Installed? | Yes | No |
| If Yes: Pump Manufacturer's na | | | | | | |
| Depth of Pump Intake | | ft. | Pumps Capacit | y rated at | | gal./min. |
| Type of pump: 1 | Submersible | 2 Turbine 3 | Jet | 4 Centrifu | ıgal 5 Reciproc | ating 6 Other |
| | | | | | structed, or (3) plugged | under my jurisdiction and was |
| completed on | | | | . day 7.0 | | year |
| and this record is true to the be | | | | | | |
| This Water Well Record was co | mpleted on. 's Waterwell | A | | d d | | year under the business |
| | | | (signature) | FROM | TO | LITHOLOGIC LOG |
| 7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION | 4 | LITHOLOGIC | | FROM | 10 | ETHOLOGIC LOG |
| BOX: | 10 45 | Top Soil- Sand-Grav | | | | |
| N | 10 47 | Dariu-Gr av | <u>△</u> T | | | |
| !!! | | | | + | | |
| NW NE | | | | | | |
| W H I I E | | | | | | |
| - 1 : -1 ! 1 | | | | | | |
| SW SE | | | | + | · - · · · · · · · · · · · · · · · · · · | |
| | | | | | | |
| S I 1 Mile | | | W-1 | + | | |
| ELEVATION: unknown | L | | | | | |
| Depth(s) Groundwater Encounter | | 2 # 2 | ft 1 | | (Uso a cocca | d sheet if needed) |
| INSTRUCTIONS: Use typewriter | | | | | | |
| copies to Kansas Department of | Health and Environmen | t, Division of Environment, V | Vater Well Contr | actors, Tope | ka, KS 66620. Send one | to WATER WELL OWNER and |