WAIER	WELLI	RECORD	rorm	W W C-5				rces: App. N												
1 LOCATION OF WATER WELL: County: Kingman			Fraction SE 4	NW ½	SE 1/4	ction Nu 32	mber	Township 7	Number S	Range Number R 10W E/W										
County: Kingman SE ½ NW ½ SE ½ 32 T 27 S R 10W E/W Distance and direction from nearest town or city street address of well if Global Positioning System (decimal degrees, min. of 4 digits)																				
located within city? Latitude: N 37.65054° Longitude: W 98.43319°																				
2 WATE	F	Elevation: 1697.87 RIM, 1697.37 TOC																		
RR#, St. Address, Box # :						Datum: above mean sea level														
	ate, ZIP Co							ethod: lega												
3 LOCA	TE WELL	S 4 DEPTH OF	COMPLE	TED WELL				ft.												
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 30 ft. LOCATON MW12																				
	AN "X" IN	Denth(s) Grow	ndwater Ence	nuntered 1			ft 2		ft 3	A										
		Type I to creat	TIC WARE EIR		7 61 A 1	olovi le-	d overfor	a macaura	on modd	ft. ay/yr 8/15/07										
SECTI	ON BOX:	WELL S SIA	IIC WATER	LEVEL]	1.01 IL.	below lan	iu suriac	e measured	. OII 1110/U	ay/y1 6/15/0/										
	N	Pum	p test data:	well water v	vas	It. a	aπer	hou	ırs pumpı	ng gpm ng gpm										
i		Est. Yield	gpm:	Well water v	vas	ft. 8	after	hou	ırs pumpi	ng gpm										
		WELL WATE	R TO BE US	SED AS: 5 F	Public wate	r supply	8 Air	conditionin	g 11 Ir	jection well										
1 1		_ 1 Domestic 3	Feed lot	6 Oil field w	ater supply		9 Dewa	tering	12 Oth	er (Specify below)										
w		² Irrigation 4	Industrial 7	7 Domestic (lawn & ga	rden) (1	0)Monit	toring well	. ,											
- SW	—— x <u>'</u> E —					,	-	-												
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes,									If yes, mo/day/yrs											
ــــــــــــــــــــــــــــــــــــــ	S	Sample was su	hmitted	,u. bailipie		TI W	/ater W/	Il Diginfect	ed? Vec	No X										
		Sample was su				VV		TI DISHITICO	. 103											
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped																				
I Ste	e) 3	KMP(SK) 0	Aspestos-C	ement 9	Otherist	echy bei	owı		weide	a										
(2)PV	C 4	ABS 7	Fiberglass		•	-			Thread	ied X										
Blank casi	ng diameter	2 in to	15 ft	Dia	in	to	ft.	Dia	in.	to ft.										
2 PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 15 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.5 ft., Weight lbs./ft. Wall thickness or gauge No.																				
TYPE OF SCREEN OR PERFORATION MATERIAL:																				
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify)																				
2 Brass 4 Galvanized steel 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 Guaze 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)																				
1 Con	ntinuous slo	t (3)Mill slot	5 Guaz	ze wrapped	7 Torch	cut	9 Drille	d holes	11 None	(open hole)										
2 Loi	uvered shutt	er 4 Key punch	ed 6 Wire	wrapped	8 Saw C	ut 1	0 Other	(specify)												
SCREEN-	PERFORA'	TED INTERVALS	: From	15	ft. to	30	ft. Fro	m	ft. t	o ft.										
			From		ft. to		ft. Fro	m	ft. t	o II.										
GR	AVEL PAC	K INTERVALS.	From	13	ft. to	31	ft. Fro	m	ft. t	o ft.										
ÇIC.			From		ft. to		ft. Fro		ft. t	o ft. o ft.										
((7)	TOT N. S. A. CO. T. T.	TAT . 1 N4	2 0		<u> </u>	ita (4)O41		22											
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other concrete, 0-3'																				
Grout Intervals From 3 ft. to 13 ft. From ft. to ft. From ft. to ft.																				
What is the nearest source of possible contamination:																				
	tic tank		ines 7 Pit pr		0 Livestoc			cticide Stor		16 Other (specify										
	er lines	5 Cess poo		ge lagoon (1				ndoned wat		below)										
	_	er lines 6 Seepage	pit 9 Feedy					well/ gas we	ell											
Direction	from well?	S		Н	low many	feet? 344	4													
FROM	TO	LITHO	LOGIC LOG	7	FROM	TO		PLUGGI	NG INT	ERVALS										
0		Topsoil	LOGIC LOC		110141	10		1 20001												
0.5		Silty-clay, light gr	av-brown r	nedium																
0.5		Plasticity, w/ lime						······································												
4		As above, red-bro		at, fine silt																
17		As above, very me		, IIII SIII																
21		As above, very mo		and at																
		Bottom, w/ light g																		
			,,																	
							Flushm	ount waiv	er from l	BOW										
		12																		
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) 7/18/07 and this record is true to the best of my knowledge and belief.																				
		tractor's License No.		. This Wat		ord was c	mpleted	on (podday)	year) 8	8/22/07										
		of Larsen & Ass			by (signatu		__		- /											
1							partment	of Health and	Environmer	nt. Bureau of Water										
INSTRUCTIONS: Please fill in blanks 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 constructed w	ell. Visit us at h	ttp://www.kdhe	ks.gov/water	well.		-		your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.										