Clip. State. ZIP. Code	TER WELL RECORD Form WWC-5 KSA 82a-1212  Section Number Township Number Range Number	KECORD FOITH	Fraction	R WELL:	TION OF WATE	1 LOCAT
WATER WELL OWNER: R. Kenneth Strothman   Ref. St. Address, Box # PO Box B   Pratt, KS 67124   MW-3   Application Number:	SE 1/2 SW 1/4 34 T 27 S R 13 EAR	14 SW	SE 1/4	ratt	Pi	county:
Re St. Address, Box # PO Box B   State ZIP Code   Pratt, KS 67124   MW-3   Application Number:	address of well if located within city?	well if located with	city street addres	m nearest town o	and direction fro	stance ar
Re St. Address, Box # PO Box B   State ZIP Code   Pratt, KS 67124   MW-3   Application Number:						Т
Main	ıman					
LOCATE WELL'S LOCATON WITH AN X'IN SECTION BOX:  N UNCLL'S STATIC WATER LEVEL 43.36 ft. below land surface measured on moldarylyr  Pump test data: Well water was ft. after hours pumping for the state of the state	Board of Agriculture, Division of Water Resources					
Depth(s) Groundwater Encountered 1 f. f. 2 ft. 3 well-water was ft. after hours pumping (set. well-water was ft	MW-3 Application Number:	MW-	67124	Pratt, KS	, ZIP Code	ity, State,
Well's STATIC WATER LEVEL 43.36 ft. below land surface measured on moldaylyr Pump test data: Well water was ft. after hours pumping ( SEL Yield gpm: Well water was ft. after hours pumping ( Well_WATER TEVEL 43.36 ft. below land surface measured on moldaylyr Pump test data: Well water was ft. after hours pumping ( Well_WATER TO BE USED AS: 5 Public water supply 6 As ir conditioning 11 Injection well 12 Impossite 3 Feed to 6 Oil field water supply 9 Dewatering 12 Other (Specify bel 2 Impossite 3 Feed to 6 Oil field water supply 9 Dewatering 11 Injection well 12 Impossite 3 Feed to 6 Oil field water supply 9 Dewatering 12 Other (Specify bel 2 Impossite 3 Feed to 6 Oil field water supply 9 Dewatering 12 Other (Specify bel 2 Impossite 3 Feed to 6 Oil field water supply 9 Dewatering 12 Other (Specify bel 2 Impossite 3 Feed to 6 Oil field water supply 9 Dewatering 12 Other (Specify bel 2 Impossite 3 Feed to 6 Oil field water supply 9 Dewatering 12 Other (Specify bel 2 Impossite 3 Feed to 6 Oil field water supply 9 Dewatering 12 Other (Specify bel 2 Impossite 4 In to 6 Asbestos-Cement 9 Other (specify below) Water Well Disinfected? Yes No X If yes, moldaylyr sample water well Disinfected? Yes No X If yes, moldaylyr sample water well Disinfected? Yes No X If yes, moldaylyr sample water well Disinfected? Yes No X If yes, moldaylyr sample water well Disinfected? Yes No X If yes, moldaylyr sample water well Disinfected? Yes No X If yes, moldaylyr sample water well Disinfected? Yes No X If yes, moldaylyr sample water well Disinfected? Yes No X If yes, moldaylyr sample water well Disinfected? Yes No X If yes, moldaylyr sample water well Disinfected? Yes No X If yes, moldaylyr sample water well Disinfected? Yes No X If yes, moldaylyr sample water well Disinfected? Yes No X If yes, moldaylyr sample water well Disinfected? Yes No X If yes, moldaylyr sample water well Disinfected? Yes No X If yes, moldaylyr sample water well Disinfected? Yes No X If yes, moldaylyr sample water well Disinfected? Yes No X If yes, moldaylyr sample	COMPLETED WELL 55 # ELEVATION: 1881.12	TED WELL	DEPTH OF COM	OX. 4	IN SECTION B	AN "X"
WELL'S STATIC WATER LEVEL 43.36 f. below land surface measured on mordaylyr pump test data: Well water was ft. after hours pumping for hou						J
Pump test data: Well water was ft. after hours pumping for the	IC WATER LEVEL 43.36 & holow land surface measured on molday/yr	DIEVEL 43	FIT'S STATIC WAR	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		<b>А</b> Г
Est. Yield gpm: Well water was ft. after hours pumping in to 550 ft. and in to WELLWATER TO BE USED AS: 5 Public water supply 9 Devatering 12 Other (Specify bel 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well was a chemical/bacteriological sample submitted to Department? Yes No X if yes, mo/daylyr sample submitted submitted to Department? Yes No X if yes, mo/daylyr sample submitted submitted to Department? Yes No X if yes, mo/daylyr sample submitted submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted to Department? Yes No X if yes, mo/daylyr sample with the submitted to Department? Yes No X if yes, mo/day				;		1 1
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2 Irrigation 4 Industrial 7 Lawn and garden (domestic) Was a chemical/bacteriological sample submitted to Department? Yes No X If yes, mo/day/yr sample was a chemical/bacteriological sample submitted Water Well Disinfected? Yes No X STYPE OF BLANK CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded X Intreaded X Stank casing diameter 4 in. to 35 ft., Dia in. to ft., Dia	R TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well	SEDAS: 5 Pub	ELL WATER TO B			-
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TYPE OF BLANK CASING USED:				<sub>w</sub>	X _	▼ L
Steel   3 RMP (SR)   6 Asbestos-Cement   9 Other (specify below)   Welded				1	S	
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded X  Slank casing diameter 4 in. to 35 ft. Dia in. to ft. Dia in. to casing height above land surface 0 in., weight 2.071 lbs./ft. Wall thickness or gauge No. 237  PVC 10 Asbestos-cement 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) 5 CCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole) 6 CCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 2 Dirilled holes 6 Wire wrapped 2 Dirilled holes 7 Torch cut 10 Other (specify) 10 Other (specify) 10 Other (specify) 11 Other (specify) 12 Other (specify) 13 ft. to 15 ft. From 15 ft. From 15 ft. To 15 ft. From 15 ft. From 15 ft. To 15 ft. From 15 ft. To 15 ft. From 15 ft. To 15 ft. From 15 ft. From 15 ft. To 15 ft. From 15 ft. From 15 ft. T		rought Iron	***************************************		OF BLANK CAS	TYPE C
2   PVC		J				
Stank casing diameter   4   in. to   35   ft. Dia   in. to   ft. Dia   in. to   casing height above land surface   0   in., weight   2.071   tbs./ft. Wall thickness or gauge No.   .237				,		
Casing height above land surface 0 in., weight 2.071 lbs./ft. Wall thickness or gauge No237 CYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement  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)  CCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)  CCREEN-PERFORATED INTERVALS: From 35 ft. to 55 ft. From ft. to ft. From	, ribdiguado					
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From ft. to ft. From ft.	33 # to 55 # From # to #	<sup>(1. 10</sup>	From 33	NITEDVAL C:	DAVEL DACK I	GE
GROUT MATERIAL:  1 Neat cement  2 Cement grout  3 Bentonite  4 Other  3 Bentonite  4 Other  3 Bentonite  4 Other  3 Bentonite  4 Other  4 Other  5 Coul Intervals  5 From  9 Fit. to  10 Livestock pens  14 Abandoned water well  15 Oil well/ Gas well  15 Oil well/ Gas well  2 Sewer lines  5 Cess pool  8 Sewage lagoon  12 Fertilizer storage  15 Other (specify below)  3 Watertight sewer lines  6 Seepage pit  9 Feedyard  13 Insecticide storage  Contaminated Sit  FROM  TO  CODE  LITHOLOGIC LOG  FROM  TO  CODE  LITHOLOGIC LOG  FROM  TO  PLUGGING INTERVALS  5 16  Red to Pink sandy Clay  16  17 Fine to very Fine Grained Sand  17  20 Grading to coarser mixed Sand			_			
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Vhat 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)  3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage How many feet?  FROM TO CODE LITHOLOGIC LOG FROM TO CODE LITHOLOGIC LOG FROM TO PLUGGING INTERVALS  0 .5 Cement .5 5 Dark Gray Sandy Clay 5 16 Red to Pink sandy Clay 16 17 Fine to very Fine Grained Sand 17 20 Grading to coarser mixed Sand	2 Centent grout 3 Bentonite 4 Other	- 22	ent <u>12 Ce</u>	n Neat Cen	TWATERIAL.	2 GROUI
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43 45 Gradees to fine to med Grained sand		eu			43	43
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To the to med gramed dand	Jiameu Janu	Janu	w meu gialli	i nie		
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction ar	ATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and	is water well was	CERTIFICATION	LANDOWNER'S	RACTOR'S OR	CONTE
' was						′_]was
completed on (mo/day/yr) 07-21-04 and this record is true to the best of my knowledge and belief. Kans	-21-04 and this record is true to the best of my knowledge and belief. Kansas		07-21-0	)	d on (mo/day/yr)	completed
The Francis Ton Contractor of Electrical Trees.	554 This Water Well Record was completed on (mg/day/yr) 08-09-04			icense No.	ell Contractor's L	Nater Wei
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Eptironment, Bureay of Water, Topeka	Har Dumn & Wall Inc	mp & Well, In	Woofter	of	business name	under the b