| WATE | R WELL RE | CORD | Form WWC | :-5 | Division of Wate | er Resources; App. No. | | |
|--|--|-------------------------------------|---|-------------|--|-------------------------------|-------------------------|--|
| | | TER WELL: | Fraction | | Section Number | Township Number | Range Number | |
| Cou | nty: | 1 AMM 1 Am nearest town or | NW NE | N Es | <u> </u> | T 28 s | R E/W | |
| | ed within city? | | | veii ii | Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: | | | |
| 1000 | | 5 Si King | mus / E. | | | | | |
| 2 WA | TER WELL OV | | rd Shoni | C. | Elevation: | | | |
| | , St. Address, Bo | x# : 1.82 | 3 SE 504 | 154 | Datum: | | | |
| City, State, ZIP Code : Kingman, KS 6 7068 Data Collection Method: 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL | | | | | | | | |
| | CATE WELL'S | 4 DEPTH OF ON | PLEPED WELL | | ft. | | | |
| | ATION 19 | | | | | | | |
| | Depth(s) Groundwater Encountered (1) | | | | | | | |
| SEC | N Pump test data: Well water wasft. afterhours pumpinggp | | | | | | | |
| | Est. Yield. 20. gpm: Well water was | | | | | | | |
| l N | W NE | | BE USED AS: 5 Pub | | | | | |
| w L | E | | | | | vatering 12 Otl | | |
| | | 2 Irrigation 4 In | ndustrial 7 Domes | tic (lawn & | k garden) 10 Mor | nitoring well | | |
| S' | SW SE Was a shaming the state of a language above to the Power of S. V. | | | | | | | |
| L | Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs Sample was submitted | | | | | | | |
| Sample was submitted | | | | | | | | |
| 5 TYP | E OF CASING I | JSED: 5 Wrough | t Iron 8 Con | crete tile | CASIN | G JOINTS: Glued | Clamped | |
| 1 | Steel 3 RM | P (SR) 6 Asbesto | s-Cement 9 Other | er (specify | below) | Welded | | |
| 2 | PVC 4 ABS | 7 Fibergla | SS, | | ······ | Threaded | ••••• | |
| 2 PVC 4 ABS 7 Fiberglass Threaded Blank casing diameter in. to ft., Diameter in. to ft. Casing height above land surface in., Weight lbs./ft. Wall thickness or guage No. | | | | | | | | |
| Casing height above land surface | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) | | | | | | | | |
| 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | |
| 1 Continuous slot 3 Mill slot 5 Guazed 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) SCREEN-PERFORATED INTERVALS: From ft. to ft. | | | | | | | | |
| From | | | | | | | | |
| GRAVEL PACK INTERVALS: From 23 ft. to 68 ft., From ft. to ft. | | | | | | | | |
| From | | | | | | | | |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other | | | | | | | | |
| | UT MATERIAI | L: I Neat cement | 2 Cement grout 3 B | entonite | 4 Other | From | ft to ft | |
| Grout Intervals: From | | | | | | | | |
| 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify | | | | | | | | |
| 2 | 2 Sewer lines 5 Cess pool 8 Sewage lagoon | | | | 11 Fuel storage 14 Abandoned water well below) | | | |
| 3 | Watertight sewer | lines 6 Seepage pit | 9 Feedyard | | | l well/gas well | | |
| | n from well? | L ITHOLOGO | | How many | | N. LICODIO DITI | | |
| FROM | TO < | LITHOLOGI | IC LOG | FROM | TO | PLUGGING INTI | ERVALS | |
| 8 | 71 3 | Braun Cl | i | + | | | | |
| 11 | 15 5 | Fine Sand | y . | <u> </u> | | | | |
| 15 | 35 | Sand | | | | | | |
| 35 | 4/ | Wht Clay. | | | | | | |
| 4,1 | 47 7 | The sand. | | | | | | |
| 47 | 56 | Sand. | 10.1 | | | | | |
| 74 | 6/ 6 | plan / Ho | Sand. | | | | | |
| 6/ | 68 | pea shall | | - | | | | |
| 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) | | | | | | | | |
| under my jurisdiction and was completed on (mo/day/year) | | | | | | | | |
| under the business name of | | | | | | | | |
| three coni | CTIONS: Use typew | riter or ball point pen. <u>PLE</u> | EASE PRESS FIRMLY and ent. Bureau of Water Good | PRINT clear | ly. Please fill in blanks | s, underline or circle the co | rrect 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 well. Visit us at | | | | | | | | |
| http://www.kdhe.state.ks.us/geo/waterwells. | | | | | | | | |