			ELL RECORD F	orm WWC-5		2a-1212	
LOCATION OF WA		Fraction	TATE TATE		tion Number		Range Number
County: Pratt	from nearest town or		NW 1/4 NW		.3	T 29 S	R 11 <b>(</b> W)
Distance and unection	4	miles Nor	rth & 4½ mi		st of	Isabel, KS	
WATER WELL OV		ardt Bros.					
RR#, St. Address, Bo		e Adelhar				•	, Division of Water Resources
City, State, ZIP Code	: Cunnir	ngham, KS	67035	770		Application Number	Permit # 39128
LOCATE WELL'S L AN "X" IN SECTIO						/ATION:	
XI XI	N Der					. 2	
NW		Pump tes	t data: Well water	was	ft.	after hours	oumping gpm
NW	Est	. <sub>Yield</sub> 800-10	gpm: Well water	was	ft.	after hours	oumping gpm
• ,, <u> </u>	Bor	e Hole Diameter.	3.9in. to	11	.4ft.	, and	in. to
w - 1	I WE	LL WATER TO B		Public wate			1 Injection well
-     (w	1	1 Domestic				9 Dewatering 12	
3"	36	2 Irrigation	4 Industrial 7	Lawn and g	arden only	10 Monitoring well	
	l Wa	s a chemical/bacte	riological sample sul	omitted to De	partment?	Yes; If ye	es, mo/day/yr sample was sub-
	s mitt	ted			<u>v</u>	Vater Well Disinfected? Yes	X No
TYPE OF BLANK	CASING USED:		Vrought iron	8 Concre	te tile	CASING JOINTS: GIL	ed Clamped
1 Steel	3 RMP (SR)	6 /	Asbestos-Cement		specify bel	,	lded
2 PVC	4 ABS		iberglass			Thr	
						ft., Dia	
• -			weight 25	<b></b> 6	lbs	s./ft. Wall thickness or gauge	No • 0.10
TYPE OF SCREEN O	R PERFORATION M			7 <u>PV</u>		10 Asbestos-cer	ment
1 Steel	3 Stainless ste	el 5 F	Fiberglass		P (SR)	• •	y)
2 Brass	4 Galvanized s	steel 6 (	Concrete tile	9 AB	3	12 None used (	open hole)
	RATION OPENINGS		5 Gauzed			8 Saw cut	11 None (open hole)
1 Continuous sk			6 Wire wr			9 Drilled holes	۲1 01 <sub>-</sub> +
2 Louvered shut	, ,		7 Torch c			10 Other (specify) • . •	51 Slot
SCREEN-PERFORAT						rom ft.	
OD 1. 151 - 1						rom ft. rom ft.	toft.
GRAVEL PA		From	ft. to				
GROUT MATERIAL			ement grout	3 Bento		rom ft. 4 Other	to ft.
						ft., From	
	ource of possible cont		it., Trom				Abandoned water well
1 Septic tank	4 Lateral lir		7 Pit privy				Oil well/Gas well
2 Sewer lines	5 Cess poo		8 Sewage lagoo	n		-	Other (specify below)
	ver lines 6 Seepage		9 Feedyard	•		ecticide storage	Circl (Specify Delow)
Direction from well?	None within	n d mile	o i occiyara			any feet?	
FROM TO		ITHOLOGIC LOG		FROM	TO		INTERVALS
0 3	Top Soil						
3 8	White Clay	7 & Lime					
8 13	Brown Clay	7					
13 77	Medium Coa		& Gravel				
77 84	Brown Clay	T					
84 97	Medium to						
97 99	Red Clay a						
99 102	Medium San		one Gravel				
	and Red	l Clay					
102 105	Medium San						
105 110	Medium San		glomerate				
110 113	Fine Red S	and					
113 114	Red Clay						
CONTRACTOR'S	OR LANDOWNER'S	CERTIFICATION:	This water well was	(1) construc	cted, (2) re	constructed, or (3) plugged u	nder my jurisdiction and was
completed on (mo/day	/year) 3-14-	.89				cord is true to the best of my l	
Water Well Contractor	's License No 1					d on (mo/day/yr)	
under the business na	ume of Peterso	n Irrigat			by (sign	444	terson
		_	•	e fill in blanks.		cle the correct answers. Send top three	copies to Kansas Department
						ER WELL OWNER and retain one for	