| WATE | K MEI | LL RECORD | Form WV | <u> </u> | | r Resources App. N | | | |
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| 1 LOC | ATION | OF WATER WELL: | Fraction | | Section Number | Township No. | Range Number | | |
| Cour | ty: Bar | ber | 1/4 NW 1/4 SW | 1/4 NW 1/4 | 5 | T 30 S | R 11 □E 🗹 W | | |
| Stree | Street/Rural Address of Well Location; if unknown, distance & direction | | | | Global Positioning System (GPS) information: | | | | |
| | | | | Latitude: | | | | | |
| | from nearest town or intersection: If at owner's address, check here | | | | | Longitude: | | | |
| | 54 Hwy to Isabel blacktop, S to Isabel Co-op,200'E & 20'S of | | | | | Elevation: (in decimal degrees) | | | |
| intersection at Main St & RR | | | | | Datum: WGS 84, NAD 83, NAD 27 | | | | |
| 2 WATER WELL OWNER: Farmers Coop / 5" FW-1 | | | | | | | | | |
| Talliele Goop / G EVV 1 | | | | | Collection Method: GPS unit (Make/Model:) | | | | |
| RR#, Street Address, Box #: Box 40 | | | | | GPS unit (Make/Model:) | | | | |
| City, State, ZIP Code : Isabel, KS 67065 | | | | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey | | | | | |
| Est. Accuracy: | | | | | | | | | |
| 3 LOCATE WELL | | | | | | | | | |
| | WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 90 | | | | | | | | |
| SEC | TION BO | = - ····(-) = - · · · · · · · · · · · · · · · · · · | | | | | | | |
| | N WELL'S STATIC WATER LEVEL52ft. below land surface measured on mo/day/yr12/20/12 | | | | | | | | |
| Pump test data: Well water wasft. after hours pumping gpm | | | | | | | | | |
| | | | | | | | | | |
| W X NW NE E EST. YIELDgpm. Well water wasft. after | | | | | | | | | |
| WELL WATER TO BE USED AS: Public water supply Geothermal Injection well | | | | | | | | | |
| Demostic Description Oil field water supply Dewatering Other (Specify below) | | | | | | | | | |
| | | | | | | | | | |
| ☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well | | | | | | | | | |
| | Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☐ No | | | | | | | | |
| S If yes, mo/day/yr sample was submitted | | | | | | | | | |
| mile Water well disinfected? ☐ Yes ☑ No | | | | | | | | | |
| C CEVID | OFC | CINCLISED. D St. 1 | 57 BYC 0 | ul | | | | | |
| 5 TYPE OF CASING USED: Steel PVC Other | | | | | | | | | |
| CASING JOINTS: ☑ Glued ☐ Clamped ☐ Welded ☐ Threaded | | | | | | | | | |
| Casing diameter .5 in. to .70 ft., Diameter in. to ft., Diameter in. to ft. | | | | | | | | | |
| Casing height above land surface. 30 in., Weight | | | | | | | | | |
| TYPE (| OF SCRI | EEN OR PERFORATION | MATERIAL: | | | | : | | |
| Steel Stainless Steel PVC Other (Specify) | | | | | | | | | |
| ☐ Brass ☐ Galvanized Steel ☐ None used (open hole) | | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | |
| ☐ Continuous slot | | | | | | | | | |
| Louvered shutter Key punched Wire wrapped Saw cut Other (specify) | | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From90 | | | | | | | | | |
| From ft. to ft., From ft. to ft. | | | | | | | | | |
| CDAVEL DACK DITERVALS. From QO A 4 65 C F | | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | | |
| From ft. to ft., From ft. to ft. | | | | | | | | | |
| 6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | |
| Grout Intervals: From .65 ft. to .0 ft., From | | | | | | | | | |
| What is the nearest source of possible contamination: | | | | | | | | | |
| Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below) | | | | | | | | | |
| Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well | | | | | | | | | |
| ☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ | | | | | | | | | |
| Direction from well West Distance from well .100 ft 5 inches | | | | | | | | | |
| | | | | | | | A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 | | |
| FROM | ТО | LITHOLOG | | FROM | TO LITHO. LO | JG (cont.) or PLU | GGING INTERVALS | | |
| 0 | 6 | Light brown, firm Silty C | | | | | | | |
| 6 | 32 | Light brown, fine-coarse | grain Sand | | | | | | |
| 32 | 46 | Lt brn.fine-coarse snd/ti | | | | | | | |
| 46 | 55 | Red-brown Sand/Clay | | | | | | | |
| | 75 | | and | | | | | | |
| 55 | | Red,fine-coarse grain S | | | | | | | |
| 75 | 82 | Red,fine-medium grain | Sand | | | | | | |
| 82 | 90 | Coarse Sand/Gravel | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| T CONTRACTORIS OR LANDOWNER'S CERTIFICATION. This was well used to see the second of t | | | | | | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged | | | | | | | | | |
| under my jurisdiction and was completed on (mo/day/year) .12/20/12 and this record is true to the best of my knowledge and belief. | | | | | | | | | |
| Kansas Water Well Contractor's License No. 665 This Water Well Record was completed on (not day year) 12/31/12 | | | | | | | | | |
| under the business name of Pratt Well Service, Inc. by (signature) | | | | | | | | | |
| INSTRUCTIONS: Use ty pewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct the co | | | | | | | | | |
| (white, blue, pink) to Kansas Depar tment of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 666 12-1367. | | | | | | | | | |
| Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Vi sit us at | | | | | | | | | |
| | | http://www.kdheks.gov/waterwell/index.html. KSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy | | | | | | | |
| | v.kdheks.g | ov/waterwell/index.html. | | | | | ie Copy, Pink Copy | | |