55 W A 7			3 (South) , RECORD	Form WV	VC-5	Division of Water	Resources; App. No.	43,553
1 L(	OCA	TION O	F WATER WELL:	Fraction			Township Number	Range Number
		y: Barbe		NE 1/4 SE		9	T 30 S	R 12 E W
Distance and direction from nearest town or city street address of well if located within city? Approximately 1 3/4 miles south and 4 miles west of Latitude: 37.444176								rees, min. of 4 digits)
	sabe				Longitude: -98.629715			
2 WATER WELL OWNER: Calvin and Carla Boyd						Elevation: Unknown		
			ss, Box # : 12001 NW Spr			Datum: NAD 8		
City, State, ZIP Code : Medicine Lodge, KS 67104 Data Collection Method: WAAS GPS Unit								
		TE WEI						
		I AN ''X''	Depth(s) Groundwater WELL'S STATIC WA	Encountered	(1)	ft. (2)	ft. (3)	ft,
S	ECT	ION BO	X: WELL'S STATIC WA	TER LEVEL	Not checke	t. below land surface	e measured on mo/day hours pumping	//yr5-31-06
_	_	N T	Est. Yield Unknown gpn	a: Well water wa n: Well water wa	s	ft. after	hours pumping	gpm
	I NW	NE-	WELL WATER TO B					
w	NW	NE-	·				vatering 12 C	
			Irrigation 4	Industrial 7 I	Domostic (layer	Strandon) 10 Mos	nitoring well	
	SW-	SE	Was a chemical/bacter	iological sample	submitted to	Department? Yes	No 🗸 🚶	If yes, mo/day/yrs
L			Sample was submitted	Z I	Water	well disinfected?	Yes No	/
S Sample was submitted Water well disinfected? Yes No V								
5 TYPE OF 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  Threaded								
(	ฐั	NC /						
2 PVC 4 ABS 7 Fiberglass Threaded Blank casing diameter 12 (PVC) in. to 98.5 ft., Diameter 12 (steel) in. to 100 ft., Diameter in. to ft.								
Blank casing diameter 12 (PVC) in. to 98.5 ft., Diameter 12 (steel) in. to 100 ft., Diameter in. to ft.  Casing height above land surface 24 in., weight 10.31 lbs./ft. Wall thickness or gauge No420								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
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)								
SCR	_		FORATION OPENINGS ARE		Ciri (Dit)	, risocotos comenc	12 Hone and (open in	
1 Continuous slot 3 Mill slot 5 Gauzed 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) Bridge slot								
SCREEN-PERFORATED INTERVALS: From 100 ft. to 120 ft., From ft. to ft.								
From         ft. to         ft., From         ft. to         ft.           GRAVEL PACK INTERVALS: From         80         ft. to         120         ft., From         ft. to         ft.           From         ft. to         ft., From         ft. to         ft.								
	`	JICA V LL	From	ft.	to	ft., From	ft. to	ft.
6 GROUT MATERIAL: 1 Neat Cement 2 Cement grout 3 Bentonite 4 Other Bentonite Holeplug								
Grout Intervals: From 0 ft. to 20 ft., From Fill sand - 20 ft. to 78 ft., From 78 ft. to 80 ft.								
What is the nearest source of possible contamination:								
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below)								
_					12 Fertiliz		well/gas well	None known
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well  Direction from well? How many feet?								
FRC		TO	LITHOLOGIC LO	)G	FROM	ТО	PLUGGING INTE	ERVALS
	0	3	Topsoil					
	8	<u>8</u> 11	Clay, tan Sand and gravel, fine, me	dium coarse				
	11	21	Clay, tan and white	didin, codise				
	21	80	Sand and gravel, fine, me	dium				
	30	91	Clay, tan and white					
	91	119	Sand and gravel, fine, me	dium				
1′	19	120	Shale					
	-							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed (3) plugged								
under my jurisdiction and was completed on (mo/day/year)  5-31-06  and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No.  185  This Water Well Record was completed on (mo/day/year)  6-9-06								
INST	RUCT	TIONS: Use	typewriter or ball point pen. PLEASE	PRESS FIRMLY and P	RINT clearly. Ple	ease fill in blanks, unde	rline or circle the correct an	swers. 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.								