| | | | TER WELL REC | ORD Form | n WWC-5 | KSA 82a-1 | | D No | | | | | |
|--|---|-------------------------|---------------------|-----------------|-----------------------|----------------|----------------|---|-----------------|---------------------|---|--------------|------------|
| | LOCATION OF WATER WELL: Fraction | | | | | | tion Numb | er lo | Township Number | | | Range Number | |
| County: | Meade | | NW 1/4 | NW 14 | SE 1/4 | | 24 | <u> </u> | _30 | S I | R | 2.7 | E/W |
| Distance an | d direction f | rom nearest tov | wn or city street a | ddress of wel | I if located w | ithin city? | | | | | | | |
| | 2 mile | North | 1½ mile | west 1 | /4 mil | e Nort | h of | Fowler | | | | | |
| WATER | WELL OWN | | e Owens | | • | | | | | | | | |
| ⊐ RR#∴St.Ad | dress, Box # | | . Box 18 | 34 | | | | В | oard of Ad | riculture, Di | ivision of | Water Re | esources |
| City, State, 2 | ZIP Code | : Car | den City | Kanga | c 678/ | 6 | | Α | pplication | Number: | 327 | Ω | - 1 |
| City, State, ZIP Code : Garden City, Kansas 67846 Application Number: 3278 B LOCATE WELL'S LOCATION WITH 4 DEPTH OF COMPLETED WELL | | | | | | | | | | | | | |
| AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1 | | | | | | | | | | | | | |
| WIN Y IIA | N | 30A. | WELL'S STATION | OWATER I ENCOU | intered 1 | ft hold | land eu | II. ∠ | red on mo | II. 3 . ./day/yr | | | n. |
| | 1 | 1 | | np test data: | | | | | | | | | |
| | L / | 1 | Est. Yield1. | | | | | | | | | | |
| | -NW - | - NE | WELL WATER | | | ublic water s | | | nditioning | | jection we | | 34 |
| | 1 | - ! | 1 Domestic | 3 Feedlo | ot 6 C | il field water | supply | 9 Dewa | tering | 12 O | ther (Spe | cify belov | w) |
| w | ' x | ¦ | 2 Irrigation | 4 🛬 ndust | rial 7 D | omestic (law | vn & garde | en) 10 Monit | toring well | | | | |
| | ^ | i | | | | | | | | | | | |
| | SW SE Was a chemical/bacteriological sample submitted to Department? Yes NoX; If yes, mo/day/yrs sample was s | | | | | | | | | | | | was sub- |
| | 1 | - | mitted | / bacteriologic | ai sample s | abilitied to i | Dopartirio | Water Well | | | X | No | |
| | | 1 | | | | | | *************************************** | | | | | |
| _ | S | | | | | | | | | | | | |
| | | ASING USED: | | 5 Wrought i | | 8 Concre | | | SING JOI | NTS: Glued | | | |
| 1 Steel | | 3 RMP (S | R) | 6 Asbestos | | | (specify be | , | | | ed | | |
| 2 PVC | | 4 ABS | | 7 Fiberglass | | | | | | | aded | | |
| | | | in. toQ | | | | | | | | | | |
| Casing heigh | ght above la | nd surface | 1.2 | | ••••• | lbs./ft. W | all thickne | ess or guag | e No | SDR | .2.6 | | |
| TYPE OF S | SCREEN OF | | | | | | sbestos-Cement | | | | | | |
| 1 Stee | | 3 Stainles | 5 Fiberglas | | | 8 RMP (SR) | | | er (Specify) | | | | |
| 2 Bras | S | 4 Galvani | zed Steel | 6 Concrete | tile | 9 AB | 5 | | 12 Nor | ne used (op | en noie) | | |
| SCREEN C | R PERFOR | ATION OPENII | NGS ARE: | | 5 Guaze | ed wrapped | | 8 Sav | v cut | | 11 None | e (open h | nole) |
| 1 Cont | inuous slot | 3 N | /lill slot | | 6 Wire v | • • | | | led holes | | | | |
| 2 Louv | ered shutter | r 4 K | Key punched | | 7 Torch | cut | | 10 Oth | er (specify | y) | | | ft. |
| SCREEN-P | PERFORATE | D INTERVALS | : From3 | 50 | ft. to | 290 | ft., F | rom | | ft. to | *************************************** | | ft. |
| SCREEN-PERFORATED INTERVALS: From 35.0 ft. to 29.0 ft., From ft. to ft. From ft. to ft., From ft., Fr | | | | | | | | | | | | | ft. |
| G | BRAVEL PAG | CK INTERVALS | | .2.0 | | | | | | | | | |
| | | | From | | ft. to | | ft., F | rom | | ft. to | | | ft. |
| 0.000 | | | | | | | | | | | | | |
| | T MATERIA | | at cement | 2 Cemen | | 3 Beni | | | | | | | |
| Grout Inter | vals: Fron | [℩] ᠃ᢓᡃᠿ≔ᠿᡃ7᠁ᠮ | sentto | ft., Fr | om17. | -0grbi | | | | | | | |
| What is the | nearest sou | urce of possible | contamination: | | | | 10 Li | vestock pens | 5 | 14 A | bandone | d water v | vell |
| 1 Sep | tic tank | 4 Late | eral lines | | 7 Pit privy | | 11 Ft | uel storage | | 15 C | Dil well/Ga | s well | |
| 2 Sew | er lines | 5 Ces | ; | agoon | 12 Fertilizer storage | | | 16 Other (specify below) | | | | | |
| 3 Wat | ertight sewe | r lines 6 See | page pit | | 9 Feedyard | | 13 In | secticide sto | rage | | | | |
| Direction fro | _ | * | . • . | | • | | How | many feet? | - | | | | |
| FROM | ТО | | LITHOLOGIC | CLOG | | FROM | ТО | 1 | PLI | JGGING IN | TERVALS | 3 | |
| | | Mongoil | & clay | | o limo | | | 01 | | | | | - |
| 0 | 30 | | α Clay | <u>α 11 CC1</u> | e TIME | | 208 | | | tle f | me s | and | |
| 30 | 45 | Sand | 7.447 | 7 | | 208 | 241 | Sand | | | | | |
| 45 | 60 | | little c | | | 241 | 243 | - | | tle l | ime | | |
| 60 | 75 | | sand (li | | | 243 | 255 | Sand | | | | | |
| 75 | 90 | | olue) & l | | | 255 | 260 | Sand | (fine | 2) & 1 | 'cem | ente | d san |
| 90 | 97 | Sand (] | <u>little fi</u> | ne & cl | Lay | 260 | 263 | Clay | | | | | |
| 97 | 154 | Clay (b | olue) | | | 263 | 270 | | (fine | 2) | | | |
| 154 | 163 | | little c | lav | | 270 | 280 | | | 2) & C | ement | ed s | and |
| 163 | 165 | Clay | | | **** | 280 | 283 | | | tle l | | | |
| 165 | 180 | | little s | and | | 283 | 289 | | | le fí | | пата | |
| | 186 | | TICCIC D | <u>unu</u> | | | | | | .TE TT | ne. | | **** |
| 180 | | Clay | | | | 299 | 301 | Clay | | | | | |
| 186 | 189 | | and & cla | | - 3 | 301 | 315 | | (litt | le fi | ne & | medi | um) |
| 189 | 195 | | little f | ine sar | na | 31.5 | 348 | Sand | | | | | |
| 195 | 203 | Sand (1 | tine) | | | 348 | 360 | ⊥Clay | & lit | tle l | ime | | |
| ⁷ CONTR. | ACTOR'S C | R LANDOWN | ER'S CERTIFICA | TION: This w | ater well wa | as (1) constr | ucted, (2) | reconstructe | ed, or (3) p | olugged und | der my ju | risdiction | and was |
| completed of | on (mo/day/v | ear)6- | -9-03 | | | | and th | is record is tr | ue to the b | est of my ki | nowledge | and belie | ef. Kansas |
| Water Well | Contractor's | Licence No | 223 | | This Water | Well Record | was com | pleted on (mo | o/day/yr) | 6-1.2 | 03 | | |
| | usiness nam | | nam Drill | | | | | by (signatur | | سعنه | | | |
| · · · · · · · · · · · · · · · · · · · | | Duili | Tam DETIT | THG THE | · | | | | | ~ | <u>~</u> | m | atton |

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correct 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 <u>constructed</u> well.