WATER WELL RECORD	Form WWC	2-5 D	ivision of Wate	r Resources App. N	0.	
1 LOCATION WATER WELL: County:	Fraction NW 1/4	SW Secti	ion Number	Township No.	Range Number R DE W	
Street/Rural Address of Well Location;				System (GPS) in	nformation:	
from nearest town or intersection: If at IE 3N. Mea			gitude:		(in decimal degrees) (in decimal degrees)	
	an Watkin	Datur	<u>m</u> : WGS 84	4, □ NAD 83, □		
2 WATER WELL OWNER: A Van Watkins Gollection Method: RR#, Street Address, Box #: 4380 NE Tsabel GPS unit (Make/Model:)						
City, State, ZIP Code: Medicine Lodge KS 6760 (st. Accuracy: <3 m, 3-5 m, 5-15 m, >15 m						
3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF	COMPLETED WELL	43	ft.			
SECTION BOX: Depth(s) Groun	dwater Encountered (1).	9 ft.	. (2)	ft. ((3) ft.	
N WELL'S STAT	WELL 5 STATIC WATER ELVEL					
Pum	test data: Well water wa	sf	t. after	hours pum	ping gpm	
NWNE EST. YIELD.	EST. YIELD. gpm Well water wasft. after					
	Bore Hole Diameter					
Domestic						
Irrigation Industrial Domestic-lawn & garden Monitoring well						
Was a chemical/bacteriological sample submitted to Department? Yes No If yes, mo/day/yr sample was submitted						
1 mile Water well disinfected? X Yes \(\square\) No						
5 TYPE OF CASING USED: Stee				••••		
CASING JOINTS: A Glued Cla	mped Welded [Threaded	0 D			
Casing diameter						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
Steel Stainless Steel XPVC Other (Specify)						
Brass Galvanized Steel None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:						
Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)						
Louvered shutter Key punched Wire wrapped Saw cut Other (specify) SCREEN-PERFORATED INTERVALS: From ft. to ft.						
SCREEN-PERFORATED INTERVALS:	From ft to	<i>U</i> .S	It., From	π. π. ··· ··· ··· ··· ··· ··· ··· ·	to It.	
GRAVEL PACK INTERVALS:	From 23 ft. to	63	ft., From	ft.	to ft.	
	From ft. to	<u>.</u>	ft., From	ft. [.]	to ft.	
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other						
Grout Intervals: From ft. to What is the nearest source of possible containing the state of the state o		11. 10	11.,	rroin	11. 1011.	
☐ Septic tank	nes Pit privy L	ivestock pens	Insecticide		ner (specify below)	
Sewer lines Cesspool Watertight sewer lines Seepage		uel storage ertilizer storage	☐ Abandoned ☐ Oil well/ga			
Direction from well		Distance from w				
FROM TO LITHOLOG	GIC LOG FI	ROM TO	LITHO. LO	OG (cont.) <u>or</u> PLU	GGING INTERVALS	
0 3 2011						
3 117 Bank	w & Mad					
47 67 Nixty 57	Atu Sal					
12 63 Red 18hal	7.7					
7 CONTRACTOR'S OR LANDOWNE	R'S CERTIFICATION:	This water well	was Constr	ucted, 🗌 reconstr	ucted, or plugged	
under my jurisdiction and was completed of	on (mo/day/year)	r Well Becard	record is true t	of the best of my k	moredge and belief.	
under my jurisdiction and was completed of Kansas Water Well Contractor's License Munder the business name of	in 5 The	by (signature)	on tho day vear	1	
INSTRUCTIONS: Use typewriter or ball point pe	n. PLEASE PRESS FIRMLY and	PRINT clearly. Ple	ease fill in blanks	and check the correct	Inswers. Send three copies	
(white, blue, pink) to Kansas Department of Health Telephone 785-296-5524. Send one copy to WA						
http://www.kdheks.gov/waterwell/index.html.						
KSA 82a-1212						