WATER WELL RECORD	Form WWC	C- 5	Division of Wate	er Resources; App. No.				
1 LOCATION OF WATER WELL:	Eraction		Section Number	Township Number				
County: Darber	SW/4 Nay4	D£1/4	25	T 3/S	R /3 E/W			
Distance and direction from nearest town or c	ity street address of w	vell it		Systems (decimal degr	rees, min. of 4 digits)			
located within city? (W Medicine Lodge 185 Latitude: Longitude:								
2 WATER WELL OWNER: 4 /a x	L Kimbal	/						
	DOT NA	Mina	OrALA-m:					
RR#, St. Address, Box # : 300 Z NW Ming Datum: City, State, ZIP Code : Market Collection Method:								
City, State, ZIP Code Mulicine Lodge K5 (a Trace-Collection Method: 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL								
LOCATION F			•					
WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered (1)								
SECTION BOX: WELL'S STATIC WATER LEVEL								
N Pump test data	a: Well water was		ft. after	hours pumping	gpm			
Est. Yield								
WELL WATER TO E WELL WATER TO E 1 Domestic 3 Fee	BE USED AS: 5 Pub	olic water	supply 8 Air	conditioning 11 Injury	ection well			
W E 1 Domestic 3 Fee	fustrial 7 Domest	u water st	uppiy 9 Dev & garden) 10 Mor	nitoring well	ier (Specify below)			
	rustriai / Donnes	cic (lawii e	& garden) 10 Wor	intoring wen	•••••			
Was a chemical/bacteriological sample submitted to Department? Yes								
Sample was submitted								
S								
5 TYPE OF CASING USED: 5 Wrought	Iron 8 Con	crete tile	CASING	G JOINTS: Glued Welded	Clamped			
1 Steel 3 RMP (SR) 6 Asbestos	-Cement 9 Othe	er (specify	below)	Welded				
2 PVC 4 ABS 7 Fiberglas	s			Threaded				
Blank casing diameter								
Casing height above land surface	in., Weight	<i>Q.O.</i>	lbs./ft. Wall thi	ckness or guage No.				
TYPE OF SCREEN OR PERFORATION MATE		0	A D.C.	11.04. (0.10.)				
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)								
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:								
1 Continuous slot 3 Mill slot 5 Guazed 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)								
SCREEN-PERFORATED INTERVALS: From								
From								
From								
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other								
Grout Intervals: From								
What is the nearest source of possible contaminat								
1 Septic tank 4 Lateral lines	1 5	10 Livest			16 Other (specify			
2 Sewer lines 5 Cess pool 3 Watertight sewer lines 6 Seepage pit		11 Fuel st		bandoned water well I well/gas well	below)			
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well How many feet?								
FROM TO LITHOLOGIC		FROM		PLUGGING INTI	ERVALS			
0 2 Sandy So		62		ed Shale				
2 At Rosema (1/4)	4.							
4 12 Red Clay	7							
12 22, fine 15	and.							
22 24 Sand	ni I							
22 24 Sand. 24 32 Sand Some 32 46 Dirty Sand.	Med,							
32 46 Dirty Sand		ļ						
44 29 Sand								
49 53 Fine, Sand								
7 CONTRACTOR'S OR LANDOWNER'S CI	POTIBLE ATION: T	This restant			ad an (2) alara 1			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mg/day/year)								
Kansas Water Well Contractor's License No This Water Well Record was completed on (mo/day/year)								
under the business name of			y (signature)	I'm (illo/day/year)	mi			
INSTRUCTIONS: Use typewriter or ball point pen. PLEA	SE PRESS FIRMLY and	PRINT clear	rly. Please fill in blanks	underline or circle the co	rect answers. Send tor			
three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 6612-1367. Telephone								
	ER and retain one fo	or your re	785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdhe.state.ks.us/geo/waterwells.					