| | | | 4 | 0. 6 | 10 | | |
|--|---------------------------|--|--|---|------------------------|------------------------------|--|
| WATER WELL DECORD | Form W | WC 5 | 7 | ope 1 | 7-5 | ao 11-0552 | |
| WATER WELL RECORD 1 LOCATION OF WATER WELL: | Form W | | Section | vision of Wate | Township No. | Range Number | |
| County: Meade | 1/4 1/2N | 14 NE 1 | 1 | RO. | | R 30 DE DW | |
| Street/Rural Address of Well Location; if unknown, distance & direction | | | Global Positioning System (GPS) information: | | | | |
| from nearest town or intersection: If at owner's address, check here | | | Latitude: (in decimal degrees) | | | | |
| Caution light and Meade Lake Rd. 2 West 1 2/ and West into | | 2/8 5 | Longitude: (in decimal degrees) Elevation: | | | | |
| | | | - Datum | <u>Datum</u> : ☐ WGS 84, ☐ NAD 83, ☐ NAD 27 | | | |
| 2 WATER WELL OWNER: Crown Constulting RR#, Street Address, Box #: 1601 NW Expressway Suite 130 | | Collection Method: GPS unit (Make/Model:) | | | | | |
| RR#, Street Address, Box #: 1601 NW Expressway Suite 130 City, State, ZIP Code : Oklahoma City OK 73118 | | | 기 Hi | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey | | | |
| | | | | Est. Accuracy: | | | |
| 3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF COMPLETED WELL445 ft. | | | | | | | |
| SECTION BOX: Depth(s) Ground | . A | | | | | | |
| N WELL'S STAT | WELL'S STATIC WATER LEVEL | | | | | | |
| Pump test data: Well water was. 3.7.2ft. after hours pumping | | | | | | | |
| EST. YIELD /OOgpm. Well water wasft. after | | | | | | | |
| W K E Bore Hole Diameter .//2in. to | | | | | | | |
| Domestic | | | | | | | |
| ☐ 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 | | | | | | | |
| 5 TYPE OF CASING USED: Steel PVC Other | | | | | | | |
| CASING JOINTS: Glued Clamped Welded Threaded | | | | | | | |
| Casing diameter6 in. to | | | | | | | |
| Casing height above land surface24 in., Weight .4.07.4lbs./ft., Wall thickness or gauge No.21316 | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | |
| ☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify) | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | |
| Continuous slot | | | | | | | |
| Louvered shutter Key punched Screen-Perforated intervals: From Screen-Perforated intervals: From 550 | | | | | | | |
| From ft. to ft., From ft. to ft. | | | | | | | |
| GRAVEL PACK INTERVALS: From145 ft. to | | | | | | | |
| From ft. to ft., From ft. to ft. | | | | | | | |
| 6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other hole plug. Grout Intervals: From 1 ft. to 25 ft., From ft. to ft., From ft. to ft. | | | | | | | |
| 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 | | | | | | | |
| □ Watertight sewer lines □ Seepage pit □ Feedyard □ Fertilizer storage ★ Oil well/gas well Direction from well □ John Land □ Distance from well □ John Distance from Well □ | | | | | | | |
| FROM TO LITHOLOG | | FROM | TO | | | IGGING INTERVALS | |
| 0 3 Sandy topsoil | | 364 | | Sand — | | | |
| 3 36 Clay and caliche | _ | 438 | 445 | Blue and | pink sandy | clay | |
| 36 58 Caliche and sand | | | | | | | |
| 58 81 Tan clay and san 81 152 Coarse and mediu | | | | | | | |
| 152 168 Clay | | | | | | | |
| 168 226 Sand and clay streaks | | | | | | | |
| 226 305 Blue clay | | | | | | | |
| 305 326 Sandy blue clay | | | | | | | |
| 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) . 1/2211 and this record is true to the best of my knowledge and belief, | | | | | | | |
| Kansas Water Well Contractor's License NokwwCL430 This Water Well Record was completed and moday/year) | | | | | | | |
| under the business name of the point of the point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and checking correct answers. Send three copies | | | | | | | |
| (white, blue, pink) to Kansas Department of Health | and Environment, Bureau | of Water, Geo | logy Section | on, 1000 SW Ja | ckson St. Suite 420, | Topeka, Kansas 66612-1367. | |
| Telephone 785-296-5524. Send one copy to WA7 http://www.kdheks.gov/waterwell/index.html. | ER WELL OWNER and | retain one for | your recor | ds. Include fee | e of \$5.00 for each g | onstructed well. Visit us at | |
| KSA 82a-1212 | | | | | | | |