| Road 11 41 | - WATE | DD (centre) R WELL RECORD F | orm WWC-5 K | SA 82a-1212 | | |
|---|---|-----------------------------|---|-------------------------------|--|---------------------------------|
| 1 LOCATION OF WATER WELL County: PLANK | | 5E 1/4 SE | Section N | , , | thip Number 34 s | Range Number R 22 E/W |
| Distance and direction from near | rest town or city? | M SITKA, KS. | Street address of | well if located with | | H SM |
| O MATER MELL OWNER: 1 | MITURE D | la tac | 1625 | | 3 | |
| RR#, St. Address, Box # : /= | 25 N. MARK | USAS, 612 | | | _ | vision of Water Resources |
| City, State, ZIP Code : 4 | nenila, KAK | 0545, 672 | | | ication Number: | |
| 3 DEPTH OF COMPLETED W | | | | | | in. to ft. |
| Well Water to be used as: | 5 Public water s | ,, , | 8 Air conditioning | = | 11 Injection well | halow |
| 1 Domestic 3 Feedlot | 6 Oil field water | | 9 Dewatering10 Observation w | | 12 Other (Specify | Delow) |
| 2 Irrigation 4 Industrial Well's static water level | 7 Lawn and gard | | | | 3 L da | v 1980 year |
| Pump Test Data None | | | 1// | | | |
| Est. Yield gpr | | ft. after | | hours pum | ping | gpm 입 |
| 4 TYPE OF BLANK CASING L | JSED: | 5 Wrought iron | 8 Concrete tile | Ca | sing Joints: Glued | gpm OFFI CMXX Clamped |
| 1 Steel 3 RMP (SR) | | 6 Asbestos-Cement | stos-Cement 9 Other (specify below | | | |
| <u>2 PVC</u> 4 A | .BS | 7 Fiberglass | | | | |
| Blank casing dia . 5 | | | | | | |
| Casing height above land surfac | e /2 | in., weight | 2.78.13 | lbs./ft. Wall thic | kness or gauge No | , |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | 7 PVC 5 Fiberglass 8 RMP | | 10 Asbestos-cement | | t |
| | 1 Steel 3 Stainless steel | | 8 RMP (SF | A) 11 Other (specify) | | |
| | Salvanized)steel | 6 Concrete tile | 9 ABS | | 2 None used (oper | · |
| Screen or Perforation Openings | <u>-</u> | | d wrapped | 8 Saw cu | • | 11 None (open hole) |
| 1 Continuous slot | 3 Mill slot | | rapped | 9 Drilled h | | |
| 2 Louvered shutter Screen-Perforation Dia | 4 Key punched | 7 Torch (| | | | in toft. |
| | From | | | | | |
| | From. | | | | | |
| | | | | | | .t. 1 |
| | From | ft. to | ft., F | | ft. to | ft. |
| 5 GROUT MATERIAL: 1 | Neat cement | 2 Cement grout | 3 Bentonite | | | |
| Grouted Intervals: From | 2 ft. to | • ft., From | ft. to . | , ft., I | From | ft. to |
| What is the nearest source of pe | ossible contamination: | DOWL | 10 | 0 Fuel storage | 14 Aba | andoned water well |
| 1 Septic tank | 4 Cess pool | 7 Sewage lagoo | on 1 | 1 Fertilizer storage | 15 Oil | well/Gas well |
| 2 Sewer lines | 5 Seepage pit | 8 Feed yard | 1: | 2 Insecticide storag | e 16 Oth | ner (specify below) |
| | 6 Pit privy | 9 Livestock pen | | 3 Watertight sewer | | |
| Direction from well | How | many feet | ? | Water Well Disinfe | cted? Yes | No |
| Was a chemical/bacteriological sample submitted to Department? Yes | | | | | | |
| was submitted | | | year: Pump | installed? Yes | N | 10 |
| If Yes: Pump Manufacturer's nar Depth of Pump Intake | | | | | | |
| | | | | 4 Centrifugal | 5 Reciprocating | ~ IM |
| 6 CONTRACTOR'S OR LANDO | | | | | | |
| ~ // \ | | 9 | | day | Photogram under | |
| and this record is true to the be | | | | , | 3 389 | year |
| This Water Well Record was con | | - | onth 3 | A day A | 1 /7/1- | , year under the business |
| | STER Well | Serv, b | y (signature) | red Kre | - 1 10 | , . your under the business |
| 7 LOCATE WELL'S LOCATION | l | LITHOLOGI | C LOG | FROM TO | Li | THOLOGIC LOG |
| → WITH AN "X" IN SECTION BOX: | 03) | CLAY | | | | |
| | 3/18 | Fine Son | rd | | | <u></u> |
| , N | 18 30 | CLAY, | · · · · · · · · · · · · · · · · · · · | | | 2 |
| . NW _ NE | 39 45 | Spridy CL | DY | | | |
| 1 1 1 | 45 (75) | GRAVII | | | 70 20 20 | |
| ž W !!! E | *************************************** | | | | REUCK | 7.1 |
| SW SE | | 1 111 | | | | 6 |
| | | 1- 411 WIA | | | | 69'set that |
| 5 | 1 25/1: | | ,79 } | | | |
| ELEVATION: | 1.1(1) | | 11 | 72 | | 4 |
| Depth(s) Groundwater Encounte | red 1 # ' | 2 ft. 3 | # 1 17 | 1 -7 - 1 - 1 | Tipe a socoad sta | |
| INSTRUCTIONS: Use typewriter | or ball point pen. please | press firmly and PRINT | clearly. Please fill i | n blanks, underline | Use a second shed or circle the correct | answers. Send ton three |
| copies to Kansas Department of Health and Environment, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records. | | | | | | |
| . Stant one for your records. | | | | | | [|