| | | | | WELL RECORD | Form WM | | 82a-121 | | | |
|------------------------------------|----------------------------|------------------------------|------------------|-----------------------|-----------------------|--------------------|------------------------|----------------|--------------------|------------------------------|
| | TION OF WA | TER WELL: | Fraction | S ¹ 1/4X | CE. | Section Num | ber | ÷ | Number | Range Number |
| County: | Meade | from postant tour | C 1/4 | | SE 1/4 | 14 | | Т 3 | ⁸⁴ s | R ²⁹ EW |
| l . | | from nearest town o | л city street ad | uress of well if loo | zated Within Ci | ıy f | | | | |
| | | Meade, KS | | | | | | | | |
| _ | ER WELL OW | | Drilling | | | | | | arrabee | |
| | Address, Bo | | | | | | | | • | Division of Water Resources |
| | te, ZIP Code | | Bend, KS | | | | | | | <u>Great Plains perm</u> |
| 3 LOCA | TE WELL'S L " IN SECTIO | | | | | | | | | |
| - " | 1 | NDe | | | | | | | | 3 |
| i i | i i | | | | | | | | | umping 120 gpm |
| | NM | NE | | | | | | | | umping £20 gpm |
| | ! | | | | | | | | • | n. to |
| Mile A | | | | D BE USED AS: | | water supply | | | | Injection well |
| - | i | | 1 Domestic | 3 Feedlot | _ | | | | • | Other (Specify below) |
| | SW | SE | 2 Irrigation | 4 Industrial | | | | _ | | |
| | ! | (<u>x</u>) _w | • | | | - | - | | | s, mo/day/yr sample was sub- |
| <u>†</u> | <u> </u> | | tted | acteriological samp | DIE SUDITIRIEU | o Department | | | ected? Yes | |
| 5 TYPE | OF BLANK | CASING USED: | | 5 Wrought iron | 8 Cc | ncrete tile | | | | nd X Clamped |
| ₽ | Steel | 3 RMP (SR) | | 6 Asbestos-Ceme | | | | OAOIIII | | ded |
| (2)F | | 4 ABS | | 7 Fiberglass | | | , | | | aded |
| | | | | • | | | | | | in. to ft. |
| | | | | | | | | | | vo |
| | | R PERFORATION M | | iii., weigin | |)PVC | D3./11. V | | Asbestos-cem | |
| | Steel | 3 Stainless ste | | 5 Fiberglass | 8 | | | | |) |
| | Brass | 4 Galvanized | | 6 Concrete tile | | ABS | | | None used (o | |
| | | RATION OPENINGS | | | auzed wrappe | | | | | 11 None (open hole) |
| | Continuous sk | | | | /ire wrapped | | _ | Drilled hol | | Tr None (open note) |
| | ouvered shut | _ | | | orch cut | | | | | |
| | | ED INTERVALS: | | | |) " | | | | toft. |
| CONLE | IN EIN ONA | LD INTLINATES. | | | | | | | | toft. |
| | GRAVEL PA | CK INTERVALS: | | | | | | | | toft. |
| | GILLIA CELLA | ion inventance. | From | | 0 | | | | | to ft. |
| 6 throu | JT MATERIAL | : Deat cem | | | | | $\overline{}$ | | *** 7 - TO | |
| Grout Int | ervals: Fro | mft. | to 20 | ft From | | ft. to | | ft. From | | ug |
| What is t | | ource of possible con | | | | | vestock | | | Abandoned water well |
| 1 Septic tank 4 Lateral li | | | | | | | _ | | | Oil well/Gas well |
| 2 Sewer lines 5 Cess poo | | | • • | | | | | storage | _ | Other (specify below) |
| 3 Watertight sewer lines 6 Seepage | | | | | | | 13 Insecticide storage | | | |
| i . | from well? | | utheast | | _ | | many fe | • | 100 | |
| FROM | ТО | | LITHOLOGIC L | .OG | FROI | | | | PLUGGING | INTERVALS |
| 0 | 24 | Sandy Clay | | | | | | | | |
| 24 | 128 | Clay | | | | | | | | |
| 128 | 135 | Sand | | | | | | | | |
| 135 | 147 | Sandy Clay | | | | | | | | |
| 147 | 155 | Sand & Gra | | | | | | | | |
| 155 | 196 | Sandy Clay | | | | | | | | |
| 196 | 204 | Fine Sand | | | | | | | | |
| 204 | 226 | Sandy Clay | | | | | | | | |
| 226 | 255 | La-rge Gra | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 7 CONT | TRACTOR'S | OR LANDOWNER'S | CERTIFICATION |)N: This water wa | ll wad (1) | estructed (2) | reconetr | ucted or f | 3) plugged up | der my jurisdiction and was |
| | | | | | | | | | | nowledge and belief. Kansas |
| | | 's License No | • | | | | | | _ | 11/92 1 |
| 1 | | me of Howard D | | | | • | | | Ma | 1/2/ |
| | | | | | | | | | Well | care - |
| INICTO | RUCTIONS: Lies + | ypewriter or ball point pen. | PLEASE PRESS EL | RMI Y and PRINT clear | v. Please fill in ble | inks, underline or | circlema | correct answer | rs. Send the three | copies to Kansas Department |