| | | | WATER | WELL RECORD F | orm WWC | -5 KSA 82a | -1212 | | | |
|--|--|---|------------------------------|--|--|---|--|-------------------------------|---|--|
| 1 LOCATION | ON OF WAT | · | action | | | ection Number | · - | | Range Number | |
| County: | | <u> </u> | NW 1/4 | NE 1/4 NE | 1/4 | _8 | <u> T 3</u> | S | R 33 E/W) | |
| Distance and direction from nearest town or city street address of well if located within city? | | | | | | | | | | |
| | | | | | | | . | | | |
| 2 WATER | R WELL OW | NER: Girther | 0,13 | | | ۸, | NW3 | | | |
| RR#, St. / | Address, Box | # : 402 Gra | - | | | MEZ | Board of A | griculture, | Division of Water Resources | |
| City, State | City, State, ZIP Code : Atwool, Ks | | | | | Application Number: | | | | |
| 3 LOCATE | E WELL'S LO | DCATION WITH 4 DEF | TH OF CO | MPLETED WELL | .15 | ft. ELEVA | TION: | | | |
| AN "X" | IN SECTION | 1 BAV. | | | | | | | 3 , , | |
| ₁ | ı | WELL, | S STATIC | WATER LEVEL . 15. | ft. | below land su | rface measured on | mo/day/yr | | |
| II I | 1 | - 1 1 | | | | | | | umping gpm | |
| Est. Yield gpm: Well water was hours pumping | | | | | | | | | | |
| Bore Hole Diameterin. to | | | | | | | | | | |
| l≅ w ⊢ | W I WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection we | | | | | | | | | |
| 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other | | | | | | • | | | | |
| | SW | SE I | Irrigation | 4 Industrial 7 | Lawn and | garden only (| 10 Monitoring well | | | |
| | 1 | ' i i | • | | | | | | s, mo/day/yr sample was sub- | |
| Į L | <u> </u> | mitted | 01101111041112 | actoriological campio co | | | ater Well Disinfecte | | No | |
| 5 TYPE (| OF BLANK C | ASING USED: | | 5 Wrought iron | 8 Cond | crete tile | | - | ed Clamped | |
| 1 St | | 3 RMP (SR) | | 6 Asbestos-Cement | | r (specify belo | | | ded | |
| ₽P\ | | 4 ABS | | 7 Fiberglass | | ` | ••• <i>•</i> • • • • • • • • • • • • • | | aded | |
| | | | 4 | | | | | | in. to ft. | |
| Casing he | ing diameter | and surface | (| in weight | | the | ft Wall thickness | or gauge N | No | |
| | | R PERFORATION MAT | | mi, weight | (7_B | | | estos-cem | | |
| 1 St | | 3 Stainless steel | LITIAL. | 5 Fiberglass | | MP (SR) | | |) . <i></i> | |
| 2 Br | | 4 Galvanized stee | اد | 6 Concrete tile | 9 A | | | ne used (or | • | |
| | | RATION OPENINGS AR | | | d wrapped | - - | 8 Saw cut | ie useu (o) | 11 None (open hole) | |
| | on reni or | | L . | | rapped | | 9 Drilled holes | | 11 None (open note) | |
| ļ | | | shed | | | | | Λ, | | |
| 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) | | | | | | | | | | |
| 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From. ft. to ft., From ft. to From. ft. to ft., From ft. to ft. | | | | | | | | | | |
| ١, | GDAVEL DA | CK INTERVALS: Fro | m 4 | l . | | | | | toft. | |
| · | GNAVELTA | Fro | | ft. to | | ft., Fro | | | to ft. | |
| 6 GROU | T MATERIAL | | | 2 Cement grout | 3 Ben | | | | | |
| Grout Inte | rvals From | | 4 | ft From | ft | to | | | ft. to ft. | |
| | | | | | | | | | Abandoned water well | |
| What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines | | | | 7 Pit privy | | | | | | |
| 2 Sewer lines 5 Cess pool | | | 8 Sewage lagoon | | 12 Fertilizer storage | | | Other (specify below) | | |
| 3 Watertight sewer lines 6 Seepage pit | | | | 9 Feedyard | | | | Strict (openity solott) | | |
| l | from well? | or intes o coopage pit | | o i codyala | | | any feet? | | | |
| FROM | TO | LITI | HOLOGIC I | .OG | FROM | TO 1 | | UGGING | INTERVALS | |
| 0 | 8 | Brown S | ittu | Class | | | | - | | |
| 8 | 15 | Brown C | 0400 | 5.14 | | | | | | |
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| H | | | | | 1 | | | | | |
| CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was | | | | | | | | | | |
| completed on (mo/day/year) | | | | | | | | | | |
| | | | | | | | | | | |
| under the business name of by (signature) INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers Send top three objects to Kansas Department | | | | | | | | | | |
| INSTRU of Hea | JCTIONS: Use ty | rpewriter or ball point pen. <u>PLE</u> nent, Bureau of Water, Topeka, | ASE PRESS FI Kansas 66620 | <u>RMLY</u> and <u>PRINT</u> clearly. Plea -0001. Telephone: 913-296-55 | ise fill in blank 145. Send one | s, underline or circ to WATER WELL C | le the correct answers of the correct answers of the correct and retain one to | Send top three or your record | e ob ies to Kansas Department ds. | |