| | | WA | ATER WELL RE | | | 2a-1212 ID | No | | | |
|---|---------------|---------------------------|---------------------|---------------------------------------|--------------------------------|-------------------------------|---------------------------------------|---------------------------------|---------------------------------|--|
| 1 LOCATI | ON OF V | VATER WELL: | Fraction | IW NE NES | ₩ Se | ction Number | Township Nur | nber | Range Number | |
| County: C | huo l' | | SW 1/4 | 8W 1/4 | NE 1/4 | 26 | T 5 | s | _R 1 X _{EW} | |
| | | on from nearest t | town or city stree | t address of well if | located within c | ity? | | | | |
| | | | | win, Clyde | | • | | | | |
| | | | | | , KO | | | | | |
| 2 WATER | WELL O | WNER: Mar l | | au | | | | | | |
| RR#, St. A | ddress, B | 30x # : 408 | Baldwin | | | | Board of Agric | ulture, D | ivision of Water Resources | |
| City, State, | ZIP Cod | e : Clyd | de, KS 6 | 6938 | | | Application Nu | ımber: | | |
| 3 LOCATE | WELL'S | | | | 44 | ft ELEVA | TION: | | | |
| | | ON BOX: | | | | | | | ft. | |
| ANA | IN SECTI | N BOX. | | | | | | | | |
| <u> </u> | | | | | | | | | 8/2/.0.0 | |
| † | i | illi | Pun | np test data: Well v | water was | ft. a | ifter | hours p | umping gpm | |
| | - NW | NE | Est. Yield .20 | 30 .apm: Well v | water was | ft. a | fter | hours p | umping gpm | |
| | 1 | i 1 | | | | | | | in. to ft. | |
| W High | Ţ | X F | | | | • | | | | |
| ≅ W | i | E | | TO BE USED AS: | | | 3 Air conditioning | | jection well | |
| | i | i | 1 Domestic | | 6 Oil field water | | | | ther (Specify below) | |
| | - SW | SE | 2 Irrigation | 4 Industrial | X Domestic (lav | /n & garden)_10 | Monitoring well | | | |
| | 1 | | | | | | | | | |
| ▼ [| 1 | | | bacteriological sampl | e submitted to De | • | | - | o/day/yrs sample was sub- | |
| | | S | mitted | | | | Well Disinfected? | | | |
| 5 TYPE O | F BLANK | CASING USED: | | 5 Wrought iron | 8 Concr | ete tile | CASING JOIN | TS: Glue | d x Clamped | |
| 1 Stee | l | 3 RMP (S | R) | 6 Asbestos-Ceme | nt 9 Other | (specify below | v) | Weld | ed | |
| X _{2 PVC} | | 4 ABS | , | 7 Fiberglass | | - | | Thres | aded | |
| | | | | | | | | | in. to | |
| | _ | | | | | | • | | | |
| Casing he | eight abov | e land surface | 12 i | in., weight .2 . | .37 | ibs. <i>.</i> | ft. Wall thickness or | gauge No | o 21.4 | |
| TYPE OF | SCREEN | N OR PERFORA | TION MATERIAL | : | X PV | C | 10 Asbes | tos-ceme | ent | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass | | | | | | 8 RMP (SR) 11 Other (specify) | | | | |
| 2 Brass 4 Galvanized steel 6 Concrete til | | | | | 9 AB | | | 12 None used (open hole) | | |
| | | | | | | | | (-F | • | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | lauzed wrapped /ire wrapped | | 8 Saw cut | | 11 None (open hole) | |
| 1 Continuous slot 3 Mill slot 6 Wire wra | | | | | | | 9 Drilled holes | | | |
| 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) | | | | | | | | | | |
| SCREEN- | -PERFOR | RATED INTERVA | LS: From | . ૐ.4 ft. to | o . 44 | ft., From | . | ft. to |) | |
| | | | | | | | | | o | |
| | GRAVEL | PACK INTERVA | | | | | | | o | |
| | | | From | ft. to | o | ft., From | I | ft. tc | o | |
| 6 GROUT | MATED | IAL: 1 Neat o | omont | 2 Cement grout | V2 Ponto | nito 4 | Othor | | | |
| | | | | | | | | | | |
| | | | | | π | | | | ft. to | |
| What is th | ne neares | st source of possi | ble contaminatio | n: | 10 Livesto | | tock pens | ck pens 14 Abandoned water well | | |
| 1 Septic tank 4 Lateral lines | | | | 7 Pit p | rivy | 11 Fuel storage | | 15 Oi | il well/Gas well | |
| 2 Sewer lines 5 Cess pool | | | | 8 Sew | age lagoon | 12 Fertilizer storage | | 16 O | ther (specify below) | |
| X ₃ Watertight sewer lines 6 Seepage pit | | | | | | | | | | |
| | | | | 9 7000 | * | | | <u> </u> | | |
| Direction from well? Northeast How many feet? 75 | | | | | | | | | | |
| FROM | TO | | LITHOLOGIC LO | OG | FROM | то | PLUG | GING IN | TERVALS | |
| 0 | 3 | Topsoi | 1 | · · · · · · · · · · · · · · · · · · · | | | | | | |
| | | | | | | l | | | | |
| 3 | 1.5 | Gray C | | | | ļ | | | | |
| 15 | 28 | Fine Sa | and | | | | | | | |
| 28 | 42 | Medium | to Coars | e Sand | | l i | | | | |
| 42 | 44 | Gray C | | | | | | | | |
| ** | | GLAY C | Lay | | | | | | | |
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| | | | | | | | | | | |
| 7 CONTE | ACTOR'S | OR LANDOWNE | R'S CERTIFICAT | ION: This water we | all was 141 const | ructed (2) rec | netructed or (3) plus | aned upo | der my jurisdiction and was | |
| | | | | | | | | | | |
| | | | | | | | | | owledge and belief. Kansas | |
| Water Well | Contract | or's Licence No | 1.38 | This Water | r Well Record wa | as completed o | on (mo/day/yr) . , | 8./.7./.0 |).O _. | |
| under the h | ousiness r | name of Pet | erson Trr | igation, 1 | nc. | by (si | gnature) M. L | 0 | Territoria | |
| | | | | | | | · · · · · · · · · · · · · · · · · · · | e te | recor | |
| INSTRUCT | TIONS: Use ty | pewriter or ball point pe | n. PLEASE PRESS FIF | RMLYand PRINT clearly, PI | ease fill in blanks, und | erline or circle the c | orrect answers. Send top thre | ee copies to | Kansas Department of Health and | |

Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.