(g), * 6'	<u> </u>		WATER	WELL RECORD	Form WWC-5	5 KSA 82a	ı-1212		
LOCATIO	ON OF WA	TER WELL:	Fraction			ction Number	Township Nun	nber	Range Number
County:	Thoma		NW 1/4	SE ¼ NW	1/4	28	т 7	s	R 32 E/W
Distance and direction from nearest town or city street address of well if located within city?									
From	m Gem K	ansas - ½ mi	. South						
WATER	R WELL OW	/NER: Lois F	erguson, F	arming					
RR#, St. A	Address, Bo		rk Street				Board of Agi	iculture, D	ovision of Water Resources
	ZIP Code				A		Application N		35,814
LOCATE AN (X")	WELL'S L	OCATION WITH 4 N BOX:	DEPTH OF CO	MPLETED WELL	242	, ft. ELEVA	TION:30.7.7	7	
. 4		Section of the sectio							
	i i								3-3-82
Pump test data: Well water was ft. after hours pumping gpm									
	Est. Yield 1700 gpm: Well water was 151 ft. after 3½ hours pumping 1200								
# w -	W I Bore Hole Diameter . 30 in. to								
2	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well							njection well	
_	- SW	SE	1 Domestic				-		Other (Specify below)
	2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well								
L	Was a chemical/bacteriological sample submitted to Department? YesNoX; If yes, mo/day/yr sample w							mo/day/yr sample was sub-	
·			itted			Wa	ter Well Disinfected?		No X
TYPE O	F BLANK (	CASING USED:		5 Wrought iron	8 Concre	ete tile	<b>C</b> EÁSING JOIN	IS Glued	Clamped
1 Ste	el	3 RMP (SR)	•	6 Asbestos-Cement	9 Other	(specify below	v)	Welde	d
2 PV	_	4 ABS		7 Fiberglass					ded
3lank casir	ng diameter		. to ,	ft., Dia	in. to		ft., Dia	ir	n. to ft.
Dasing heigh	ght above la	and surface	ir	ո., weight		lbs./	ft. Wall thickness or	gauge No	
YPE OF	SCREEN O	R PERFORATION I	MATERIAL:		7 PV	С	10 Asbes	stos-cemer	nt
1 Ste	:el	3 Stainless s	teel	5 Fiberglass	8 RM	IP (SR)	11 Other	(specify) .	
2 Bra	iss	4 Galvanized	steel	6 Concrete tile	9 AB		12 None	used (ope	en hole)
SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)									
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes									
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)									
SCREEN-PERFORATED INTERVALS: From. 152 ft. to 323 W.A. Brown, From ft. to ft.									
From. 232 ft. to 242 Cook ft., From ft. to ft. to ft.									
G	RAVEL PA	CK INTERVALS:	From	10 ft. to	242	ft From	m	ft. to	)
			From	ft. to		ft., From			
GROUT	MATERIAL	.: 1 Neat cer	ment 2	Cement grout	3 Bento		<del>,</del>		
pa .									. ft. to
		ource of possible co		,			tock pens		andoned water well
							el storage 15 Oil well/Gas well		
2 Sewer lines 5 Cess pool				8 Sewage lago		12 Fertilizer storage 16 Other (specify below)			
		ver lines 6 Seepag		· · · · · · · · · · · · · · · · · · ·			secticide storage		
Direction fr		West, Nort	•	o i ocayara		How mai	J	2000	
FROM	TO		LITHOLOGIC LO	OG .	FROM	TO I		THOLOGI	C LOG
0	38	Soil, clay							
38	50	Limestone &	clav						The second secon
50	85			one streaks	-				
85	130	Cemented sa		one streams	1				
130	148	Med. sand	.nuy clay	***************************************	-				
148	157	1						*	11 12 (1
		Clay		100 TENNES (100 AND 100 AND 10					MANAGEMENT AND
157	178	Limestone		-		<del> </del>			
178	236	Med. sand							
236	1245	Shale			+ -	<del> </del>	·		and the second second second second
242	<b>)</b>								
	<del></del>					<del> </del>	The state of the s	2011/10-1	
			The same and a stronger of the decision and it and a stronger than a second	NAMES AND ADDRESS OF THE STATE					744
<u> </u>	·					-			WALLE CO.
<del></del>						<u> </u>			· · · · · · · · · · · · · · · · · · ·
1	L					<u> </u>			
CONTP	ACTOR'S	OR LANDOWNER'S	CERTIFICATIO	N: This water well wa	as (1) constru	cted, (2) reco	onstructed, or (3) plu	gged unde	er my jurisdiction and was
ompleted	on (mo/day	/year) . 3-2-82.		· · · · · · · · · · · · · · · · · · ·		and this reco	ord is true to the best	of my kno	wledge and belief. Kansas
Vater Well	Contractor	's License No	245	This Water W	ell Record wa	s completed	on (mo/day/yr)5	-29-82	
inder the b	business na	<sub>ime of</sub> Wester	n Well and	Pump, Inc.		by (signa	ture) Kon	F 8	Jenna L
NSTRUCT	ΓΙΟΝS: Use	typewriter or ball po	int pen, <i>PLEASE</i>	PRESS FIRMLY and	d <i>PRINT</i> clear	ly. Please fill in	n blanks, underline o	r circle the	correct answers. Send top
hree copie	s to Kansas	Department of Heal ne for your records.	th and Environme	nt, Division of Environ	ment, Environ	mental Geolog	gy Section, Topeka, I	(S 66620. S	Send one to WATER WELL
STATE II a	iid ictalli Ol	io ioi your records.					· · · · · · · · · · · · · · · · · · ·		