			WATE	R WELL RECORD	Form WWC	-5 KSA 82	2a-1212		
1 LOCATI	ION OF WA	TER WELL:	Fraction			ection Numbe	r Township Nun	nber	Range Number
County:	Sherma		NE 1/4	NE 1/4	NTE 14	Ę	т 8	s	R 38 E/W
Distance a	and direction	from nearest town of	or city street ac	dress of well if located	d within city	<del>, )</del>	<u> </u>	<u> </u>	" 30 <u>- W</u>
i .	_	of Edson	,			•			
			-						
_	R WELL OW		lo Jarmi						
1	Address, Bo	×#: Edso	n, Kans	as 67733			Board of Agr	iculture, Di	vision of Water Resources
City, State	e, ZIP Code	:					Application N		
3 LOCATI	E WELL'S L	OCATION WITH 4	DEPTH OF C	OMPLETED WELL 21	30	ft FLEV	ATION:		
AN "X"		N BOX:	nth(s) Ground	water Encountered 1	<b>J O</b>	11. LLLV	ATION		· · · · · · · · · · · · · · · · · · ·
l- r	1	X De	Purios Caracio	MATERICOURTER 1.		π.	2	π. 3.	· · · · · · · · · · · · · · · · · · ·
1 <b>† 1</b>	i								1-9-86
	NW	NE	Pump	test data: Well water	rwas	ft <u>.</u> .	after	hours pum	ping gpm
Est. Yield gpm: Well water was not tested after hours numping gpm									
<u>.</u>	i	I Bo	re Hole Diame	ter8in. to	230	ft	and	in	toft.
* w	1	E WE	II WATER T						
-	i	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well  1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)							•
	SW	SE	1 Domestic						ther (Specify below)
	1		2 Irrigation		7 Lawn and	garden only	10 Observation well		
II L	1	L I Wa	ıs a chemical/b	acteriological sample s	ubmitted to	Department? \	YesNo. <b>x</b>	; If yes, n	no/day/yr sample was sub-
		mit					ater Well Disinfected?		No
5 TYPE C	OF BLANK (	CASING USED:		5 Wrought iron	8 Con	crete tile			X Clamped
1 Ste		3 RMP (SR)		6 Asbestos-Cement					·
2 PV						er (specify belo			1
1	-	4 ABS		7 Fiberglass		· · · · · · · · · · · · ·		Thread	ed
Blank casi	ing diameter	5in.	to21.0	ft., Dia	in.	to	ft., Dia	in	. to ft.
Casing hei	ight above la	and surface	1.8	in., weight 1 8	/1.0	Ibs	./ft. Wall thickness or	gauge No.	1/4"
TYPE OF	SCREEN O	R PERFORATION M	ATERIAL:		7 F			tos-cemen	,
1 Ste		3 Stainless ste		5 Fiberglass		MP_(SR)			
2 Bra		4 Galvanized		<del>-</del>	-	-			
				6 Concrete tile	9 4			used (oper	n hole)
SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)									
1 Co	ontinuous slo	t 3 Mill sl	ot	6 Wire v	vrapped		9 Drilled holes		
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)									
SCREEN-PERFORATED INTERVALS: From									
From									
GRAVEL PACK INTERVALS: From1.8									
	SHAVEL PA	ON INTERVALS:	From	<b>υ π. το</b>	∠ე.∪	ft., Fro			
			From						
e grout	T MATERIAL	: 1 Neat ceme	ent 2	2 Cement grout	3 Ben	tonite 4	Other		
Grout Inter	rvals: Froi	n 4 ft. 1	to1.8	ft., From	ft.	to	ft., From		ft. to ft.
What is the	e nearest so	urce of possible con	tamination:						indoned water well
l		4 Lateral lir		7 Pit privy					
2 Sewer lines 5 Cess pool				7 Pit privy		11 Fuel storage		15 Oil well/Gas well	
•				8 Sewage lagoon		12 Fertilizer storage		16 Other (specify below)	
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage									
Direction f		south				How ma	any feet? 140		
FROM	ТО		ITHOLOGIC L	.OG	FROM	то	LI'	THOLOGIC	LOG
0	72	top soil				<u>1</u> T			
72	146	sand and	clav s	trips					
146	171			and strips					
171				ann antha		<del>                                     </del>			
•	196	sand cla			<u> </u>				
196	210			ock strips					
210	226	sand roc	k hard		1				
226	229	sand							
229		sand roc	1-						
	200				<u> </u>				
		not_	to shale	9					
					.				
					1				
					1				
					-	<del>                                     </del>			
	L								
7 CONTR	RACTOR'S C	R LANDOWNER'S	CERTIFICATIO	N: This water well wa	s (1) consti	ructed, (2) rec	onstructed, or (3) plud	ged under	my jurisdiction and was
completed	on (mo/dav/	year)	1986			and this reco	ord is true to the heet	of my know	ledge and belief. Kansas
Water Well	Contractor's	License No		1.39. This Water We	all Record	العادات المالك	on (mo/douter)	20-8	A
					an necora V				
INSTRUCT	TIONS HAS	ne of Bartel	T DLTTT	TITR		by (signa	ature) Jeyce	Der	ull
three conic	i iOIVO. USE I se to Kanasa	ypewriter or ball poin. Department of Health	and Environment	rness rimmly and	rnin i clea	ırıy. Please till i	in blanks/underline of	circle the c	correct answers. Send top
three copies to Kansas Department of Health and Environment, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.									
		, .							