| w [©] j | WATE | R WELL RECORD | Form WW | C-5 KSA 82 | a-1212 | | |
|--|----------------------|---------------------------|---------------------|-----------------------|-------------------------|-------------------|-----------------------------|
| 1 LOCATION OF WATER WELL: | Fraction | 1 | | Section Numbe | | Number | Range Number |
| County: SHEWAN | NW 1/4 | NW 145 | W 1/4 | 9 | ₹ 9 | (s) | R 4/2 EW |
| Distance and direction from nearest tow | | ddress of well if loca | ted within cit | y? | | | |
| 4 & South KA | MORANO | | | | | | |
| 2 WATER WELL OWNER: | n. Livin | 19 000 | | | | | |
| RR#, St. Address, Box # : | 1 - A | 30× 18 | | | Board of | Agriculture, [| Division of Water Resources |
| | IORALO | , | | | Application | n Number: | |
| LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | 4 DEPTH OF C | OMPLETED WELL. | 150 | ft. ELEV | ATION: | | |
| AN X IN SECTION BOX: | Depth(s) Ground | water Encountered | 1, 000 | , ft. | 2 | ft. 3. | ES7, |
| ĪŦ | WELL'S STATIC | WATER LEVEL | 977 | t. below land su | urface measured o | n mo/day/yr | EST, |
| NW NE I | Pump | test data: Well wa | ater was | ft. | after | . hours pur | mping gpm |
| | Est. Yield | gpm; Well wa | ater was | ft. | after | . hours pur | mping apm |
| # W 1 E | Bore Hole Diame | eter 8 ,7,in. t | o | | and | in. | to |
| ¥ W 1 ! E | WELL WATER T | O BE USED AS: | 5 Public w | ater supply | 8 Air conditioning | g 11 l | Injection well |
| 1 sw se | 1 Domestic | 3 Feedlot | 6 Oil field | water supply | 9 Dewatering | 12 (| Other (Specify below) |
| | 2 Irrigation | 4 Industrial | 7 Lawn an | d garden only | 10 Monitoring we | II | ****** |
| | Was a chemical/b | pacteriological sample | | | | | mo/day/yr sample was sub |
| <u> </u> | mitted | | | | ater Well Disinfect | | No 🕹 |
| 5 TYPE OF BLANK CASING USED: | | 5 Wrought iron | 8 Cor | | | | I Clamped |
| 1 Steel 3 RMP (SF | l) | 6 Asbestos-Cemen | t 9 Oth | er (specify belo | | | ed |
| 2 PVC 4 ABS | | 7 Fiberglass | | | | Threa | ded |
| Blank casing diameter 5 | in. to | ft., Dia | in. | to | ft., Dia | <i>.</i> i | in. to ft. |
| Casing height above land surface | | in., weight | | lbs | ./ft. Wall thickness | or gauge No |) |
| TYPE OF SCREEN OR PERFORATION | | | | PVC | | bestos-ceme | |
| 1 Steel 3 Stainless | steel | 5 Fiberglass | 8 | RMP (SR) | 11 Oti | ner (specify) | |
| 2 Brass 4 Galvanize | ed steel | 6 Concrete tile | 9 . | ABS | 12 No | ne used (ope | en hole) |
| SCREEN OR PERFORATION OPENING | SS ARE: | 5 Gau | uzed wrapped | | 8 Saw cut | | 11 None (open hole) |
| 1 Continuous slot 3 Mi | ll slot | 6 Wire | e wrapped | | 9 Drilled holes | | |
| 2 Louvered shutter 4 Ke | y punched | 7 Tore | ch cut | | 10 Other (specif | y) | |
| SCREEN-PERFORATED INTERVALS: | From | ft. to | | ft., Fro | om | ft. to | o |
| | From | | | | | | o |
| GRAVEL PACK INTERVALS: | From | ft. to | | ft., Fro | om | ft. to | o |
| | From | ft. to | | ft., Fro | om | ft. to |) ft. |
| | | 2 Cement grout | | ntonite 4 | Other Sart | Me. | CIAY LOAM |
| Grout Intervals: From. | | ft., From | ft | . to | ft., From 🛣 | Z. 5 | . ft. to Bet for. Jft. |
| What is the nearest source of possible | | | | 10 Live | stock pens | 14 At | pandoned water well |
| 1 Septic tank 4 Latera | | 7 Pit privy | | 11 Fuel | _ | 15 Oi | l well/Gas well |
| 2 Sewer lines 5 Cess | • | 8 Sewage la | goon | 12 Ferti | lizer storage | 16 Ot | ther (specify below) |
| 3 Watertight sewer lines 6 Seepa | ige pit | 9 Feedyard |) | 13 Inse | cticide storage | | |
| Direction from well? | | | | | any feet? | mile | 9 |
| FROM TO | LITHOLOGIC L | _OG | FROM | | | LUGGING IN | TERVALS |
| | | | 150 | 25 | Clay | | |
| | - A | | 15 | 5 | Cemer | F | |
| | - 11 | Atu M | 5 | 10 | Clay | | |
| | - JUN | Tu No | | | | | |
| | 11.1 | After | | | | | |
| | 1 1/10 h | ^ | | | | | |
| | 1 - 1 - 1 | () , | | | | | |
| - William | - 110 | | | | | | |
| 1 | | | | | | | |
| | | - 04 - 440 | | | | *** | W. A. |
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| | | | | | | | |
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| | | | | | | | |
| 7 CONTRACTOR'S OR LANDOWNER | S CERTIFICATION | ON: This water well | was (1) cons | tructed, (2) rec | onstructed, or 6 | plugged und | my jurisdiction and was |
| completed on (mo/day/year) . S | THONE | | | . and this reco | ord is true to the b | est of my kno | wledge and belief. Kansas |
| Water Well Contractor's License No | 789 | This Water | Well Record | | on (mo/day/yr) | | 4/ |
| under the business name of | | enling | | by (signa | | un ka | lies |
| INSTRUCTIONS: Use typewriter or ball point p | en. PLEASE PRESS F | IRMLY and PRINT clearly. | Please fill in blar | ks, underline or circ | le the correct answers. | Send top three c | opies to Kansas Department |
| of Health and Environment, Bureau of Water, | торека, Kansas 66620 | -7320. Telephone: 913-296 | -5545. Send one | to WAFER WELL (| OWNER and retain one | for your records. | |