		WATER WE	LL RECORD	Form WWC-5	KSA 82	a-1212		
LOCATION OF		Fraction			tion Number		_	Range Number
County: Pottow	gtomie	SW 1/4 3	SE 14 SU	1/4	3	T /0	<u> </u>	R /∂(Ē)W
Distance and direc	tion from nearest town or	city street addres	s of well if locate	d within city?	4 E 05	c wa mego		
WATER WELL	OWNED C' 1 C	111	+ Jubil +	> 00				
BR# St Address	OWNER: CHY of we	mego 6"	Test well #	2-02		Donald of Acad	D:	
City State 712 Co	Box # : 430 Lil	ncoin 1)	1.1.6	110				vision of Water Resources
LOCATE MELL	S LOCATION WITH 4 D	40,155	663	47		Application N	umber:	
AN "X" IN SECT								
- —	N Debi							tt.
† i								4-2-85
NW -	NE							ping gpm
								ping gpm
* w								to
_		L WATER TO BE		5 Public water		•		
sw -	l SEl	1 Domestic 2 Irrigation				9 Dewatering		
!~		•						no/day/yr sample was sub-
<u> </u>	s was		lological sample	submitted to D	•	ater Well Disinfected?		no/day/yr sample was sub- No
TYPE OF BLAN	IK CASING USED:		/rought iron	8 Concre				Clamped
1 Steel	3 RMP (SR)		sbestos-Cement		ste the (specify belo			
2 PVC	4 ABS		iberglass		• •	•		ed
	eter in. to			in to		ft Dia	ineau	to #
Casing height above	e land surface	24 in v	weight		lhe	/ft. Wall thickness or c	auge No	
	N OR PERFORATION MA			7 PV		10 Asbest		
1 Steel	3 Stainless stee		iberglass	-	IP (SR)			· · · · · · · · · · · · · · · · · · ·
2 Brass	4 Galvanized st		oncrete tile	9 AB		12 None u		
SCREEN OR PER	FORATION OPENINGS A	RE:	5 Gauz	ed wrapped		8 Saw cut	٠.	11 None (open hole)
1 Continuous	slot 3 Mill slo	t		wrapped		9 Drilled holes		(-)
2 Louvered s	hutter 4 Key pu	nched	7 Torch	cut		10 Other (specify) .		
SCREEN-PERFOR	ATED INTERVALS: F	rom4.5	ft. to	<i>55</i>	ft., Fro	om	ft. to	ft.
GRAVEL								
	F	rom	ft. to		ft., Fro	om	ft. to	ft.
GROUT MATER			ment grout					
Grout Intervals:	Fromt. to	12	ft., From	ft.	to	ft., From		ft. to
What is the neares	at source of possible conta				10 Live			andoned water well
1 Septic tank	4 Lateral line	es .	7 Pit privy		11 Fuel	storage	15 Oil	well/Gas well
2 Sewer lines	s 5 Cess pool		8 Sewage lag	oon	12 Ferti	lizer storage	16 Oth	er (specify below)
•	sewer lines 6 Seepage p	oit	9 Feedyard		13 Inse	cticide storage		
Direction from well						any feet? 400		
FROM TO	-	THOLOGIC LOG		FROM	то	LIT	HOLOGIC	LOG
0 6	top soil							
6 19	Clay brown							
19 27	Clay, grey					1000		
27 30	fs-cs-med.9	HAVE, Drow	<i>N</i>			···		,
30 32	Clay, brown							
32 35	fs-cs-brown		1 ~1					
35 55	fs-cs-med.	teg gravel, L	mown, clea	ny				
				-				

- +								
				+				The state of the s
	10.00.1.1.10.1.1.1.1.1.1.1.1.1.1.1.1.1.		Ph.1	41:				
J CONTRACTOR	'S OR LANDOWNER'S C	ERTIFICATION: 1						
completed on (mo/d	day/year) 4 2	· · o. · · · · · · · · · · · · · · · · ·			and this rec	ord is true to the best of	of my knov	vledge and belief. Kansas
	ctor's License No						(2)	
	name of STrader Jse typewriter or ball point		CO. IV			in blanks underline or	circle the	correct anguara Cond to-
three copies to Kan	sas Department of Health a	and Environment C	Division of Enviror	ment. Environ	mental Geolo	av Section. Toneka. KS	66620. S	end one to WATER WELL
OWNER and retain	one for your records.			,		0,,		