	WATER WELL REC	ORD Form WWC-	5 KSA 82a-12		
LOCATION OF WATER WELL: County: WADUNS (C	Fraction WEV W W	4 SE VA	ction Number	Township Number	Range Number R / O ©W
Distance and direction from nearest tow	vn or city street address of well	if located within city?	in wabli	usic Box 2.	3
WATER WELL OWNER: John RR#, St. Address, Box # : PP#	1 Box 23			Board of Agriculture	e, Division of Water Resources
City State 7ID Code	- 11 - 1 - C K	6547		Application Number	•
LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	DEPTH OF COMPLETED \ Depth(s) Groundwater Encoun	<i>N</i> ELL			
TYPE OF BLANK CASING USED: 1 Steel 2 PVC 4 ABS Blank casing diameter Casing height above land surface TYPE OF SCREEN OR PERFORATION	Bore Hole Diameter	Well water was Well water was AS: 5 Public wa llot 6 Oil field wastrial 7 Lawn and sample submitted to learn 8 Concoment 9 Othe	ft. after ft. after ft. and ft	hours	pumping gpm pumping gpm .in. to .ft. 1 Injection well 2 Other (Specify below) By No Clamped Placed Preaded Injection well 2 Other (Specify below) By No Light contact the second
1 Steel 3 Stainless		<u> </u>	MP (SR)		fy)
2 Brass 4 Galvaniz	•			12 None used (-,
SCREEN OR PERFORATION OPENIN 1 Continuous slot 3 M	ey punched	5 Gauzed wrapped 6 Wire wrapped 7 Torch cut ft. to	6 9 10 ft., From .	3 Saw cut 9 Drilled holes 0 Other (specify) ft	11 None (open hole)
GRAVEL PACK INTERVALS:		ft. to	ft., From . ft., From . ft., From		. to
GROUT MATERIAL: 1 Neat of Grout Intervals: From	ft. to2 .5 ft., Fro	m		k pens 14	ft. to ft. Abandoned water well Oil well/Gas well
2 Sewer lines 5 Cess pool 8 Sewage lago			12 Fertilizer storage 16 Other (specify below)		
3 Watertight sewer lines 6 Seep		edyard	13 Insecticide storage		
Direction from well? EAST			How many	<i>7</i> √	••••
FROM TO	LITHOLOGIC LOG	FROM	то	PLUGGING	INTERVALS
0 30 Brown	CLAV				
30 40 Sprdy	CLOV				
40 45 Five S	ind				
US 62 Course	Card				
43 02 64136	3220				
					
			+ +		
			+		
			 		
			\leftarrow		
7 CONTRACTOR'S OR LANDOWNER	3'8 CERTIFICATION: This wat	er well was (1) constr			
completed on (mo/day/year)	Q. L. 7/			TA"	knowledge and belief. Kansas
Water Well Contractor's License No.		Water Well Record w	as completed on	(mo/day/yr)	14/1
under the business name of	Idener will I	Villing	by (signature	e) Crain No	/ CWD/PI
INSTRUCTIONS: Use typewriter or ball point of Health and Environment, Bureau of Water,	pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> , Topeka, Kansas 66620-0001. Telephone	clearly. Please fill in blanks e: 913-296-5645. Send one t	underline or circle the	e correct answers. Send top thre ER and retain one for your reco	ee copies to Kansas Department ords.