WA	TER W	ELL	REC	ORD			Fori	m WWC-	-5	Division	of Water	r Resources; App. No.		
	LOCATIO				ÆLL:		Fraction	5W1/45		Section Nu	mber	Township Number	Range Number	
	County:	nd die	EY ection f	from no	agreet to	avn or of				ZZ		Systems (decimal des	R 7 EW	
	ocated wit	na an thin ci	tv? <i>M</i>	I by Y	/ 8 W	EST	by Silect at	ddress of w	TARI	Latitude:	monnig	; systems (decimal de)	grees, min. or 4 digits)	
	.comoa wii	Ul	, /	M U	LEN	ORTH	I ON'S	CENICA	@ l					
2	WATER	WEL	L Ó Wi					EN ACR		Elevation.	erromanumanou-massu			
	RR#, St. A	Addres	s, Box				ENIC O		1	Datum:				
	City, State	e, ZIP	Code	:	• -			5 6650		Data Colle	ection N	Method:		
3	LOCATE	WEI	L'S	4 DE										
	LOCATIO		-~			_ = = 11.4.1							·	
	WITH AN		IN	Depth((s) Grou	ndwater	Encounte	red (1)		ft. (2	2)		ft.	
	SECTION BOX: WELL'S STATIC WATER LEVEL												/yr <i>Y.1.251.1.1</i> .	
-	N			m . **	Pump	test data	a: Well w	ater was		ft. after		hours pumping	gpm	
												hours pumping		
<u></u>	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below													
W	2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well											\ 1 \ 2		
	Was a chemical/bacteriological sample submitted to Department? Yes; If yes, mo/day/yrs													
	Was a chemical/bacteriological sample submitted to Department? Yes; If yes, mo/day/yrs Sample was submitted													
	S													
5]	YPE OF	CASI	NG US	SED:	5 W	rought	Iron				CASINO	G JOINTS: Glued	Clamped	
	1 Steel		3 RMP		6 A	sbestos	-Cement	9 Other	r (specify	below)		Welded		
	2 PVC		4 ABS	-Armetta		berglas						Threaded		
Bla	nk casing	diame	ter	يد.	in. to	l7	ft., Di	ameter	i	n. to	ft.,	Diameter	in. toft.	
	ing height PE OF SC							eight . 4.9 .		bs./ft. V	vall thic	ckness or guage No.	· «-O O	
1 Y	PE OF SC 1 Steel			iless St				7 PVC	Ο Δ	BS		11 Other (Specify)		
	2 Brass			anized			crete tile	8 RM (SR			ement	12 None used (open		
SC	REEN OR							0 1411 (51	., 101	100000000000000000000000000000000000000		Tai Troite disea (oper		
	1 Conti	nuous	slot	3 Mil	l slot	5 C	auzed wra	apped 77	Torch cut	9 Drille	d holes	11 None (open l	nole)	
	2 Louv	ered sl	hutter	4 Key	punche	d 6 V	Vire wrapp	ed (85	Saw Cut	10 Other	(specif	ý)		
SC	REEN-PE	RFOR	ATED	INTE	RVALS	From.	79	ft. to .	9	f. % ft., F	rom	ft. to	ft.	
	From													
	GRA	VEL.	PACK	INTE	XVALS:							ft. to . ft. to		
						rrom.		II. 10		Il., I	10m	It. to	1t.	
6 (GROUT N	//ATE										,		
Gro	out Interva	ls:	Fron	n 5	f	t. to	3 .0f					t., From		
Wł	at is the n										4 = -		42.04	
	1 Septi						7 Pit priv	•	10 Livesto	~		secticide Storage	16 Other (specify	
	2 Sewe				5 Cess p		8 Sewage		11 Fuel st	_		oandoned water well il well/gas well	below)	
Di	3 Wate ection from	rugnt : m wali	sewer I 19	mies Non	o seepa	PRE	9 Feedya			zer Storage		ii weii/gas weii	•••••	
		O				OLOGIO			FROM			PLUGGING INT		
110	OM	6	Rl	ZOLIN	U CZ		2 100	The second secon	1110141			12000110 1111		
		72			BROG		LAY							
	72 10			NA										
	TONIES:	OR C =		age a more	D 0 ** ** **			LINE CAT	1	بإسال	()	13/(2)	, 1 (2) 1 (
7 (UNTRA	CTOR	'S OR	LANI	DOWN	ER'S C	ERTIFIC	AHON: T	his water	well was	i) consti	ructed (2) reconstruc	ted, or (3) plugged	
under my jurisdiction and was completed on (mo/day/year)														
Kansas Water Well Contractor's License No S. I. S This Water Well Record was completed on (mo/day/year) S. I. S under the business name of RLUE WALLEY BRILLING ZNO by (signature)													W V V. & S	
				riter or b	all point r	en. <u>PLE</u> .	ASE PRESS	FIRMLY and	PRINT clear	ly. Please fill	l in blank	s, underline or circle the o	correct answers. Send top	
thre	e copies to k	Kansas I	Departme	ent of He	ealth and I	Environme	ent, Bureau o	of Water, Geol	ogy Section	, 1000 SW Jac	kson St.,	Suite 420, Topeka, Kansa	s 66612-1367. Telephone	
1 785	-296-5522.	Send	one to	o WAT	iek WE	LL OWI	NEK and r	recain one to	or your re	coras. Fee	: 01 \$5.	.00 for each constructed	ed well. Visit us at	

http://www.kdheks.gov/waterwell/index.html.