		TER WELL REC	ORD For	m WWC-5	KSA 82a-1	1212 ID No	0			
1 LOCATION OF W		Fraction		مر ا الم	Sec	tion Number	Township Nu		Range Number	
County: Kiles		SE 14	SE 14	WE1/4		19	<u>т 18</u>	(s)	R <b>T</b> EW	
Distance and direction from nearest town or city street address of well if located within city? FROM Meanhattan go 1/2 50 with										
on South		iattan v						•	·	
2 WATER WELL OV	VNER: Bacc	Y Ande	c son	1						
RR#, St. Address, Box	(# : a42	5. men	hattan	rve			Board of Ag	riculture. Divi	sion of Water Resources	
City, State, ZIP Code	Man	hattan	.Ks. 6	6502				Number: 0		
3 LOCATE WELL'S L	OCATION WITH	4 DEPTH OF C	OMPLETED	WELL3.	2	ft. ELEVA				
AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1										
N N	i	WELL'S STATI	C WATER LE	VEL <i>].5</i>	ft. belo	w land surfac	e measured on mo	/day/yr		
		P <u>u</u> i	mp test data:	Well water w	as	ft. a	after	hours purr	ping gpm	
NW -	NE	Est. Yield WELL WATER	gpm:	Well water w					ping gpm	
1	مدا	Domestic				supply	8 Air conditioning 9 Dewatering	•	ction well er (Specify below)	
W Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)  2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well										
SW SE Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs sample was sub-										
1	1	mitted	in bacteriologic	Jai Sample Suc	Jiiilled to L		ater Well Disinfecte		No	
Trade train biointoda (65)										
S S										
5 TYPE OF BLANK	CASING USED: 3 RMP (SI		5 Wrought 6 Asbestos		8 Concre	ite tile specify below			Clamped	
1 Steel	4 ABS	,	7 Fiberglas		,		) 		ed	
Blank casing diameter	,	in to							in. toft.	
			in wein	ht S. 6 4	40		lbs./ft. Wall thickne	ss or quage !	No	
TYPE OF SCREEN C			, woig		<b>⊘</b> P\/			estos-Cemen		
1 Steel	3 Stainles		5 Fiberglas	s		IP (SR)				
2 Brass	4 Galvaniz		6 Concrete		9 ABS			e ùsed (open		
SCREEN OR PERFORATION OPENINGS ARE: 5 Guazed wrapped 8 Saw cut 11 None (open hole)										
1 Continuous slot 2 Wilcott P 00 6 Wire wrapped 9 Drilled holes										
2 Louvered shutt	er 4 K	ey punched 1,		7 Torch cu	ıt		10 Other (specify	')	ft.	
SCREEN-PERFORAT		: From	15	ft. to	S	ft From		ft. to	ft.	
		From		ft. to		ft., From		ft. to	ft.	
GRAVEL PA	ACK INTERVALS	: From		ft. to <b>2&gt;</b>	2	ft., From		ft. to	ft.	
		From		ft. to	•••••	ft., From	•••••	ft. to	ft.	
6 GROUT MATERI	Al: 1 Nos	t cement	2 Cemen	t grout	Sent	one	1 Other			
									t. toft.	
What is the nearest so			16., 1 1	OIII	IL. K	10 Livest			ndoned water well	
	Lete			7 Dit priva			•		well/Gas well	
1 Septic tank 2 Sewer lines		7 Pit privy			<ul><li>11 Fuel storage</li><li>12 Fertilizer storage</li></ul>		16 Other (specify below)			
	s pool	8 Sewage lagoon				_	16 (11)	er (specify below)		
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage  Direction from well?										
Direction from well?	reast	LITUOLOGIA	2100		5DOM			OOINO INTE	·DV(A1.0	
FROM TO	<del> </del>	LITHOLOGIC	LOG		FROM	ТО	PLU	GGING INTE	HVALS	
8 1	100	Soyl	./ .		+					
1 16	Beau	in Clai	/ <b>~</b> //	άλ T						
16 24	med	ium Sa	and /	WATE )						
24 35	Cou	CST S	and (							
			' \							
			<del> </del>							
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			·			$\overline{}$				
7 CONTRACTOR'S	OR LANDOWNE	B'S CERTIFICA	TION: This .w	ater well was	Constru	icted (2) reco	onstructed or (3) pl	uaaed under	my jurisdiction and was	
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION. This water well was (1) constructed (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year)										
Water Well Contractor		451					d on (mo/day/yr)		4/2005	
under the business na		100	11-11	D - 11	<b>)</b>	=	signature)	1	1/0/00	
	01 ~ 0	en. PLEASE PRESS E	IRMLY and PRINT	Clearly Please fill	in blanks und			o three copies in	Kansas Department of Health	
and Environment, Bureau	and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATERWELL OWNER and retain one for your									
records. Fee of \$5.00 for	each constructed well	<u>.                                    </u>								