MW - 195 WATER WELL RECO	RD	Form WWC	-5	Division of W	ater Resource	s: App. No		
1 LOCATION OF WATER WELL: Fraction				Section Number		ip Number	Range Number	
County: Riley				18		S	R T (E)W	
Distance and direction from nearest town or city street address of well if Global Positioning Systems (decimal degrees, min. of 4 digits)								
located within city?	Latitude:							
West Arby's parking lot				Longitude:				
2 WATER WELL OWNER: KDHE				Elevation:				
RR#, St. Address, BOX# 1000 SW Jackson St., Str. 420				Datum:				
City, State, ZIP Code Tope Ka, Ks. Coldo12-1367				Data Collection Method:				
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL								
LOCATION								
SECTION BOX: W								
	Pump test data: Well water wasft. after							
	WELL WATER TO BE USER AS, 5 Rublic water comply 9 Air conditioning 11 Injection well							
	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								
Sa	ample was submitted.		Water	well disinfecte	d? Yes	No <b>X</b>		
S								
5 TYPE OF CASING USE	D: 5 Wrought I		crete tile	CAS	ING JOINTS		Clamped	
	(SR) 6 Asbestos-	Cement 9 Othe	r (specify	below)		Welded		
2 VC 4 ABS	7 Fiberglass			• • • • • • • • • • • • • • • • • • • •		Threaded	X	
Blank casing diameter	in. toک.گ	O ft., Diameter	ii	1. to	ft., Diameter	`	in. toft.	
Casing height above land sur				bs./ft. Wall	thickness or	guage No	×:h1.0	
TYPE OF SCREEN OR PER			0.4	BS	11 Otha	r (Specify)		
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:								
ontinuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)								
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw cut 10 Other (specify)								
From								
GRAVEL PACK INTERVALS: From								
From ft. to ft., From ft. to ft.								
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other								
Grout Intervals: From .	Q ft. to	36. X ft., From		ft. to	ft., From		ft. toft.	
Grout Intervals: From								
1 Septic tank	4 Lateral lines	7 Pit privy	10 Livesto	ock pens 13	Insecticide s	torage	16 Other (specify	
2 Sewer lines			11 Fuel ste	-	Abandoned		below)	
3 Watertight sewer line					Oil well/gas			
Direction from well?				/ feet?				
FROM TO	LITHOLOGIC	LOG	FROM	ТО	PLUC	GING INT	ERVALS	
O 1' Aspha	<u> </u>			ļ				
1 32' Clay	to Sitty clay		-					
32 40 Sind	, tyr		-	+				
							***************************************	
				+				
			1					
							Transfer to the	
7 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)								
Kansas Water Well Contractor's License No								
under the business name of Environtal Priority Said Inc. by (signature) PHANT INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, under the or circle the correct answers. Send top								
<b>INSTRUCTIONS</b> : Use typewriter	or ball point pen. PLEA	<i>SE PRESS FIRMLY</i> and	PRINT clear	y. Please fill in bl	anks, under ine			
three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at								
http://www.kdheks.gov/waterwell/index.html.								