| WA | TER WELL REC | ORD Form W | NC-5 KSA | 82a-1212 | ID No | | | |
|--|--|-------------------------------------|---------------------------|-----------------------------|---|---------------------------------------|--|--|
| 1 LOCATION OF WATER WELL: County: Waubusse | Fraction 1/4 | SW4 S | W 1/4 | Section Nur | nber Tov | vnship Number | Range Number | |
| Distance and dispetion from page of to | un or city atroot a | ddroop of wall if la | cated within | ity? From | PAXICO | | | |
| Claud Buntist 60 3m; L | () EOST | Pionell 1 | PATHON B | 63 N | oth + A | EISTON | Drivini | |
| 2 WATER WELL OWNER: 50M | Kusha | and the same | | 4 | <u>-</u> | | | |
| RR#, St. Address, Box # : 3670 City, State, ZIP Code : MacL | | KS Rd. | 6 50 | 7 | Ap | plication Number: | ivision of Water Resources | |
| 3 LOCATE WELL'S LOCATION WITH | | OMPLETED WEL | | _ | | | | |
| AN "X" IN SECTION BOX: | Depth(s) Groun | idwater Encounter C WATER I EVEL | ed 1/ | t below land | ft. 2 surface measure | ft. 3 ad on mo/dav/vr | ft. | |
| | Pur | np test data: We | ll water was | | ft. after | hours p | umping gpm | |
| NW NE | | gpm: We TO BE USED AS: | | vater supply | | · · · · · · · · · · · · · · · · · · · | umpinggpm ijection well | |
| | Domestic | • | | water supply | 9 Dewat | - | other (Specify below) | |
| W 1 1 E | 2 Irrigation | 4 Industrial | 7 Domest | ic (lawn & gar | den) 10 Monito | oring well | | |
| 1 1 05 | | | | | | | | |
| SW SE | Was a chemica mitted | I/bacteriological sa | ample submitt | ed to Departm | | No; If yes, m Disinfected (Yes) | no/day/yrs sample was sub- No | |
| 1 | miliou | | | | *************************************** | | 110 | |
| 5 TYPE OF BLANK CASING USED: | | 5 Wrought iron | 8 (| Concrete tile | CAS | SING JOINTS: Que | d Clamped | |
| 3 RMP (S | R) | 6 Asbestos-Cem | ent 9 (| Other (specify | pelow) | vveid | ed | |
| Blank casing diameter | :- *- | 7 Fiberglass | | | | | aded | |
| Casing height above land surface | | | | | | | e No | |
| TYPE OF SCREEN OR PERFORATION | | woight as | | 7 PVC | 103./11. *** | 10 Asbestos-Cem | | |
| 1 Steel 3 Stainles | | 5 Fiberglass | | 8 RMP (SR) | | , , , , , , |) | |
| 2 Brass 4 Galvania | | 6 Concrete tile | | 9 ABS | | 12 None used (op | • | |
| SCREEN OR PERFORATION OPENII | | | Guazed wra Wire wrappe | • | 8 Saw 9 Drille | | 11 None (open hole) | |
| | fill`slot ey punched | | Torch cut | • | | | ft. | |
| SCREEN-PERFORATED INTERVALS | | <i>30</i> ft | to 50 | ft., | From | ft. to | ft. | |
| ODAVEL BACK INTERVALO | From | ft. | to | ft., | From | ft. to | ft. | |
| GRAVEL PACK INTERVALS | | | | | | | π. | |
| | | | | | | | | |
| GROUT MATERIAL: 1 Nea | t cement | 2 Cement gro | ut 🔾 | Bentonite | | | ft. toft. | |
| What is the nearest source of possible | contamination: | | •••••• | | Livestock pens | | bandoned water well | |
| | ral lines | 7 Pit | privy | 11 | Fuel storage | | il well/Gas well | |
| 2 Sewer lines 5 Cess | | | wage lagoon | agoon 12 Fertilizer storage | | e 16 C | 16 Other (specify below) | |
| ř – j | 3 Watertight sewer lines 6 Seepage pit 9 Feedyar | | edyard | <u> </u> | | | | |
| Direction from well? | LITHOLOGIC | | FRO | | v many feet? | /SO' | TEDVALO | |
| FROM TO | LITHOLOGIC | LOG | FRO | JM 10 | | PLUGGING IN | TEHVALS | |
| 1 18 8 | 111 | | | | | | | |
| 18 22 Beach | + Brown | Class | | | | | | |
| 72 .31 Brown 31 42 Gard 42 50 Blu | Shoke | | | | | | | |
| 31 42, Gravil | <i></i> | | | | | | | |
| 42 50' BLW | Shale | | | | | | | |
| | | | | | | | | |
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| | | | | | | | | |
| | | | | | | | | |
| 7 CONTRACTOR'S OR LANDOWNE | DE COTIFICA | FIONI, This water | uoll woo 4 | abetructal (0 | \ rooonstructed | or (2) plugged tra- | lor my juriodistics and | |
| | HS CERTIFICA | water water | well was | and i | his record is true | to the best of mv kn | ier my jurisdiction and was lowledge and belief. Kansas | |
| Water Well Contractor's Licence No | 451 | | | | | | 28/2004 | |
| under the business name of | dimon h | ria Driv | Lug | 1 | by (signature) | ling | of Cupp. | |
| | | | | | | | · • • • • • • • • • • • • • • • • • • • | |

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top 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 <u>constructed</u> well.