WATER WELL RECORD		Form WWC-5		Division of Water Resources; App. No.			
1 LOCATION OF WAT County:	TER WELL:	Fraction NE1/4 N	E 1/4 S	Section Number	Township T	Number S)	Range Number R 15 (B) W
Distance and direction	from nearest town or cit. NOT 14 OF Jope	Kr Inites	I	atitude: _ongitude:	Systems (de	cimal degr	ees, min. of 4 digits)
RR#, St. Address, Box City, State, ZIP Code	# 5441 N	W- 3975-51 H ([66]	_ I	Elevation: Datum: Data Collection	Method:		
LOCATION	4 DEPTH OF COMP		60	ft.		(3)	ft
SECTION BOX:	Depth(s) Groundwater Encountered (1). 20 ft. (2) ft. (3) ft. WELL'S STATIC WATER LEVEL. 20 ft. below land surface measured on mo/day/yr. Pump test data: Well water was ft. after hours pumping gpm Est. Yield. 3gpm: Well water was ft. after hours pumping gpm 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) 1 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs						
W NW NE E							
Sample was submitted							
5 TYPE OF CASING US Steel 3 RMP (2 PVC) 4 ABS		Cement 9 Other (specify b	elow)	,	Welded	Clamped
Blank casing diameter							
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)							
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From. 4 Other (specify) From. ft. to ft., From ft. to GRAVEL PACK INTERVALS: From. 2 Other (specify) ft. GRAVEL PACK INTERVALS: From. 2 Other (specify) ft.							
GRAVEL PACK INTERVALS: From							
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Intervals: From							
1 Septic tank2 Sewer lines	4 Lateral lines 5 Cess pool ines 6 Seepage pit	Pit privy 10 S Sewage lagoon 11 P Feedyard 12	Livestoc Fuel stor Fertilizer	rage 14 At r storage 15 Oi	secticide stor pandoned wa l well/gas we	ter well	6 Other (specify below)
FROM TO	LITHOLOGIC		FROM	TO	PLUGGI	NG INTE	RVALS
9 / 100	Sai						
20 311 810	un Glay	Sond & Some Good	(d)	Vater)			
34 66 60	oly She	Le Licht	5				
		(4)		1			
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) 2							
Kansas Water Well Contractor's License No							
three copies to Kansas Department	nt of Health and Environment WATER WELL OWNE	, Bureau of Water, Geology	Section, 10	000 SW Jackson St.,	Suite 420, Tope	ka, Kansas 6	66612-1367. Telephone