WATER WELL RECORD	Form WWC-5	Ι	Division of Water	r Resources; App. No. 🗀	
1 LOCATION OF WATER WELL: County: Signate Distance and direction from nearest town or c	Fraction	Sect	tion Number	Township Number T	Range Number R 15 EW
located within city? AN OF Tol	? HN OF Topoka Latitude:				
2 WATER WELL OWNER: M F - RR#, St. Address, Box # : 2828 N. City, State, ZIP Code : TopeKan	John Haas W. Button Id KS 66618	Ele Dat	vation: vation: um: a Collection N		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N Pump test data: Well water was. ft. after hours pumping. gpm Est. Yield. gpm: Well water was. ft. after hours pumping. gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 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 Was a chemical/bacteriological sample submitted to Department? Yes No No Sample was submitted. Water well disinfected? Yes No					
5 TYPE OF CASING USED: 5 Wrought 1 Steel 3 RMP (SR) 6 Asbestos	s-Cement 9 Other (specify belo	w)	G JOINTS: Glued Welded	_
Blank casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 2.6 in., Weight lbs./ft. Wall thickness or guage No. SOR TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (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: 1 Continuous 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) SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft. From 5.6 ft. to 5 ft., From ft. to ft. GRAVEL PACK INTERVALS: From 7.5 ft. to ft., From ft. to ft.					
GROUT MATERIAL: 1 Neat cement 2 Cement grout 8 Bentonite 4 Other					
2 Sewer lines 5 Cess pool 3 Watertight sewer lines 6 Seepage pit Direction from well?	8 Sewage lagoon 11 9 Feedyard 12	Fuel storag Fertilizer S	e 14 Al		below)
FROM TO LITHOLOGI	CLOG		ТО	PLUGGING INT	ERVALS
39 60 Fine to Cook	se Drongen				
7 CONTRACTOR'S OR LANDOWNER'S Cunder my jurisdiction and was completed on (mo Kansas Water Well Contractor's License No under the business name of INSTRUCTIONS: Use typewriter or ball point pent PLE three copies to Kansas Department of Health and Environm 785-296-5522. Send one to WATER WELL OW http://www.kdheks.gov/waterwell/index.html.	o/day/year)	and this Well Record by (si MT clearly. F y Section, 1000	s record is true was completed ignature) Please fill in bland O SW Jackson St.,	to the best of my known on (mo/day/year) s, underline or circle the consumption of Suite 420, Topeka, Kansas	orrect answers. Send top 66612-1367. Telephone