WATER WELL RECORD	Form W	WC-5	Division of Water Resources; App. No.					
1 LOCATION OF WATER WILL:	Fraction	V1/4 50 1/4	Section N			Number	Range Jumber	
Distance and direction from nearest town or cir	y street address	0 of well if	Clobal Pag		T /	S	R 19 6 W rees, min. of 4 digits)	
located within aitv?		s of well li	Latitude:		Systems (decimal deg	rees, min. of 4 digits)	
located within gity?	934 2	NO ST						
2 WATER WELL OWNER: TWEE C	Elman		Elevation	n:				
2 WATER WELL OWNER: THE CARR#, St. Address, Box # : 1/33 W.	elnut		Datum:					
City, State, ZIP Code : Peny	K3 660	73	Data Col	lection N	Aethod:			
3 LOCATE WELL'S 4 DEPTH OF COM	PLETED WEL	L6.0.		ft.				
LOCATION		-			_			
WITH AN "X" IN Depth(s) Groundwater								
SECTION BOX: WELL'S STATIC WA	WELL'S STATIC WATER LEVEL							
Figure 1 Fst Vield onm	Est. Yieldgpm: Well water wasft. after							
WELL WATER TO DE HOED AC 5 D 11'								
W Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)								
2 Irrigation 4 Ind	ustrial 7 D	omestic (lawn &	& garden)	10 Moni	itoring wel	1		
SW SE W						k		
Sample was submitted Water well disinfected? Yes No								
S								
5 TYPE OF CASING USED: 5 Wrought	fron 8	8 Concrete tile	11	CASING	JOINTS:		Clamped	
1 Steel 3 RMP (SR) 6 Asbestos-	Cement 9	Otner (specify	below)			Weided		
PVC 4 ABS 7 Fiberglass Threaded. Blank casing diameter 5								
Casing height above land surface								
TYPE OF SCREEN OR PERFORATION MATE	RIAL:						/.	
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)								
SCREEN OR PERFORATION OPENINGS ARE:								
1 Continuous slot 3 Mill slot 5 Guazed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 4 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)								
SCREEN-PERFORATED INTERVALS: From								
From								
GRAVEL PACK INTERVALS: From								
From								
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other								
Grout Intervals: From								
What is the nearest source of possible contamination:								
1 Septic tank Lateral lines		10 Liveste	ock pens	13 Inse	ecticide St	orage	16 Other (specify	
2 Sewer lines 5 Cess pool	8 Sewage lago	on 11 Fuel st	orage	14 Aba	andoned w		below)	
3 Watertight sewer lines 6 Seepage pit	9 Feedyard	12 Fertiliz	er Storage		well/gas v	well		
Direction from well?		How man	y feet?	/ <i>()</i> ()			
FROM TO LITHOLOGIC	LOG	FROM	TO		PLUGO	GING INT	ERVALS	
		6	+ /	Be	How P So	II.		
				1000		~ _		
		,		· 18	0 - 50	1		
		/	+0	10				
			}					
T CONTROL CONTROL ON V 127	D							
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. 536. This Water Well Record was completed An (mo/day/year) 12-07								
under the business name of	E NO DE LINE	haler well kee	z (signatur	e)		(year)	4	
under the business name of INSTRUCTIONS: Use typewriter or ball point yen. PIEA	SE PRESS FIRML	Y and PRINT clear	ly. Please fil	i in blanks.	underline or	circle the co	orrect answers. Send top	
three copies to Kansas Department of Health and Environmen 785-296-5522. Send one to WATER WELL OWN	t, Bureau of Water	r, Geology Section,	1000 SW Jac	ekson St., Su	uite 420, Top	eka, Kansas	66612-1367. Telephone	

http://www.kdhe.state.ks.us/geo/waterwells.