NW - I							
WATER WELL RECORD		Form WWC-	5	Division of Water Resources; App. No.			
1 LOCATION OF WATER WELL:		Fraction		Section Number	Township Number	Range Number	
County: WY	ANDONTE	Og Nahal Basisianin	T / S	R 33 (B)W			
County: Wyarbotte NW455 4NW 4 Of TILS R 33 C Distance and direction from nearest town or city, street address of well if located within city? Wyarbotte Co. Park a Latitude: 39.1124							
STANG.	AVE, RWERVIEW A		Longitude: -94.868				
2 WATER WELL OWNER: AA MESULAID OF SELECT				Elevation:			
RR#, St. Address, Box # :C/O LBG EYN POTTER City, State, ZIP Code : TOS E 19 AVE # A 2 NORTH KANSAS CITY, MO. 64116				Datum:			
City, State, ZIP Code : 105 English Kansas cm, Mo. 64116				Data Collection Method:			
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL							
LOCATION							
WITH AN "X"							
SECTION BOX	Pump test data: Well water wasft. after						
	Est. Yieldgpm: Well water wasft. after hours pumpinggpm						
NW. NE	THE THE PER PER PER PER PER PER PER PER PER PE						
w X	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							
SW SE Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs							
Sample was submitted							
S							
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped							
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded							
PVC 4 ABS 7 Fiberglass							
Blank casing diameter							
Casing height above land surface							
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							
Fromft. toft., Fromft. toft.							
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 ft. to ft., From ft. to ft., From ft., From ft.							
What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify							
1 Septic tank			0 Livesto		secticide Storage	16 Other (specify	
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well							
Direction from well?							
FROM TO	LITHOLOG		FROM	TO	PLUGGING INT		
0 3 3 5	SICT BUL						
3 5	CLAY BRN STI			-			
5 9 9 13	CLAY MED > F	ing Sand Ben.	The state of the s				
13 25	CLAY MEDY FINE	INE SAND BEN.					
23 26	SAWI FINE SHEE	BRN- REFUGAL			Additional		
		.,, ., ., ., ., ., ., ., ., ., ., ., .,				<u></u>	
7 CONTRACTOR'S OR LANDOWNED'S CERTIFICATION. This water well was (1) magnetizated on (2) always							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) (2) (a) (a) (b) (c) (1) and this record is true to the best of my knowledge and belief.							
Kansas Water Well Contractor's License No							
under the business name of 3c Oricing by (signature)							
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 constructed well. Visit us at							

http://www.kdheks.gov/waterwell/index.html.