WATE	R WELL	REC	CORD	Forr	n WWC-	5	Divisio	n of Water	Resources; App. No	
	ty: ()		ter well: Offe	Fraction 5 1/4	NE 14 N	E 1/2MV			Township Number	R 25 (E)W
locat	ed within c	ity?	from nearest town	•			Latitude:	le: 310	1293, 20 1420 710 3	11144 35
RR#	TER WEL 4, St. Addre 5, State, ZIP	ss, Box		irtax Tra	theway	rminali I	Elevation Datum:	n:	of currently	available
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL										
1	CATION									
1	'H AN "X"		Depth(s) Groundy	vater Encounter	red (1)	24	ft.	(2)	ft. (3) ft.
SEC	ECTION BOX: WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr									
	Est. Yieldgpm: Well water wasft. after hours pumping									ggpm
WELL WATER TO BE USED AS: 5 Public water supply 8 Air										
w		- E								Other (Specify below)
	v SE -	.								
	s	Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs Sample was submitted								
5 TYP	E OF CAS	ING U	SED: 5 Wrou	ight Iron	8 Concr	ete tile		CASINO	JOINTS: Glued.	Clamped
1	Steel	3 RMF	(SR) 6 Asbe	stos-Cement	9 Other	(specify t	pelow)		Welded	L
Diam'r.	₽VC	4 ABS	7 Fiber	glass					Thread	ed
Blank casing diameter in to in to it. Diameter in to it. Diameter in to it. Casing height above land surface. Thus it. Wall thickness or guage No.										
TYPE OF SCREEN OR PERFORATION MATERIAL:										
1 Steel 3 Stainless Steel 5 Fiberglass QPVC 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 3Mill 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										
From										
From										
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other										
Grout Ir				ftft	From	f	t. to	ft.	From	ft. toft.
What is the nearest source of possible contamination:										
	Septic tank			nes 7 Pit privy		Livesto	-		ecticide Storage	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										
Directio	n from wel			•	H	ow many	feet?!	Lin b	anday of	ank Storage Facili
FROM	TO	-		GIC LOG		FROM	TO		PLUGGING IN	TERVALS U
9	<i>7 35</i>	Bre		Clay		·				
	35	54	-ис.							
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) $\frac{1}{2}$										
under th	e business i	name o	of MALC	·F	ims water \	bv hv	na was co (signatu	re) D	on (mo/day/year).	<i>h</i>
INSTRUC	CTIONS: Use	e typewr	iter or ball point pen.			INT clearly	. Please fil	ll 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.