	WATE	R WELL RECORD	Form WWC-5	KSA 82	a-1212	SVEW	1-0)
LOCATION OF WATER WELL:	Fraction		Sec	tion Numbe	r Township N	lumber	Range Number
County: 62914	1/4		1/4 502	cail-3-	T //	_ <i></i>	R 5 GW
istance and direction/from nearest to			ed within city?			,	
570 Gn	cxt. A.	E JUNC	tion C	tu K	5 6644	/	
WATER WELL OWNER: FINA	0:15 ch	inical Co.	,				
RR#, St. Address, Box # : PP Bo	x 2159				Board of	Agriculture, D	ivision of Water Resource
ity, State, ZIP Code : Da //a	s texas	75221			Applicatio	n Number:	
LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N	4 DEPTH OF C	OMPLETED WELL	30.1	. ft. ELEV	ATION:		
AN "X" IN SECTION BOX:	Depth(s) Ground	water Encountered	1 78	.o ft	2	ft. 3.	
	i						nping gpr
NW NE		•				•	nping gpr
.							tof
W F	1	O BE USED AS:	5 Public water				njection well
-	1 Domestic	3 Feedlot					Other (Specify below)
SW SE	2 Irrigation	4 Industrial			_		.,,
	1						mo/day/yr sample was su
	mitted	bacteriological sample	Sabilition to D		ater Well Disinfect		1
TYPE OF BLANK CASING USED:	1 miles	5 Wrought iron	8 Concr				Clamped
1 Steel 3 RMP (S	R)	6 Asbestos-Cement					ed
PVC 4 ABS	,	7 Fiberglass			•		ded.
Blank casing diameter	in to 20		in to		ft Dia	111100	n to f
Casing height above land surface	•						
TYPE OF SCREEN OR PERFORATIO		Jilli, Weight	DPV			bestos-ceme	
1 Steel 3 Stainles		5 Fiberglass					
	6 Concrete tile	8 RMP (SR) 9 ABS			11 Other (specify)		
SCREEN OR PERFORATION OPENIN			5 Gauzed wrapped		8 Saw cut		11 None (open hole)
1 Continuous slot Mill slot		6 Wire wrapped			9 Drilled holes		11 None (open noic)
,—	ey punched	7 Torc	• •			fv)	
SCREEN-PERFORATED INTERVALS:				4 -			
SOMELINI EMI OMATED MATERIALO.)
GRAVEL PACK INTERVALS:	From 7	. , π. το .	18	π., Ff	om	۴۰ اا), , , , , , , , , , , , , , , , , , ,
CHAVEE FACK INTERVALS.	From	. ft. to		ft., Fr			
GROUT MATERIAL: 1 Neat		©Cement grout					
		ft From	o Demo	to -			. ft. to
What is the nearest source of possible							pandoned water well
•		7 Pit privy				15 Oil well/Gas well	
2 Sewer lines 5 Cess pool				12 Fertilizer storage			her (specify below)
•		8 Sewage lagoon 9 Feedyard		13 Insecticide storage		10 0	itel (specify bolow)
3 Watertight sewer lines 6 Seepage pit Direction from well?		9 Feedyard			How many feet? 60		
FROM TO	LITHOLOGIC	LOG	FROM	TO		LUGGING IN	ITERVALS
0 08" 1.	na 1.7						
0.81' S.O" TOPS	7-47						
S.0 10.0 Box	11019						
10.0 15.0 Brm.	Clar						
	(1)	F.G. Sand.					
20.0 30.0 Tax.	Clay	fur Sanz.					
20.0 50.0 74%.	Janey C	i a y					
				 			
					<u> </u>		
				†			
				 	<u> </u>	<u> </u>	
				L			
CONTRACTOR'S OR LANDOWNE	R'S CERTIFICAT						
ompleted on (mo/day/year) 6							wledge and belief. Kansa
Vater Well Contractor's License No	,	This Water \	A			1/5-7-5	-44
nder the business name of Kun	tz enw	roxMsxtal	SERVICE	by (sign	ature) //h/	rup	
INSTRUCTIONS: Use typewriter or ball point		•		underline or circ	ele the correct answers.	Sand top three of	copies to Kansas Department

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. Sand top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.