County: (	0.10. 11.	TER WELL:	Fraction		1	Section Numb	i '	willibei	Range Number
Dictarge -			SW 1/4		SW 1/4	27	T 11	S	R 6 (E)W
		n from nearest town		ddress of well if lo	cated within c	ity?			
		Airfield - Fort R	• .						
2 WATEF	R WELL OV	VNER: Fort Riley	, DES						
		×# : 1970 2nd S					Board of Adrid	culture. Divi:	sion of Water Resources
,	•	Fort Riley		442-6016			Application Nu	,	
3 LOCATE					51	# FI			999
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w L	ž B	5 p- 1							ı. to
- "	1	E w	ELL WATER TO	O BE USED AS:			8 Air conditioni	•	Injection well
1		-	1 Domestic	3 Feedlot	6 Oil field w	ater supply	9 Dewatering	12	Other (Specify below)
All	- SW	1	2 Irrigation				(10) Monitoring we		
<b>↓</b>  x	- July	W	/as a chemical/l	bacteriological sar	mple submitted	d to Departm	ent? YesNo.	; If yes	, mo/day/yr sample was
<u> </u>	`	SU	ıbmitted			,	Water Well Disinfec	ted? Yes	No 🗸
5 TYPE O	F BLANK (	CASING USED:		5 Wrought iron	8 Cor	ncrete tile	CASING JO	NTS: Glue	d Clamped
1 Ste		3 RMP (SR)		6 Asbestos-Ceme		er (specify b			led
2)PV		4 ABS		7 Fiberglass					aded <b>√</b>
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									No Sch 40
	-			m., weight	(7)F				
		R PERFORATION M						bestos-cem	
1 Ste		3 Stainless ste		Ū	8 F	. ,			")
2 Bra		4 Galvanized				ABS		ne used (or	•
		RATION OPENINGS			uzed wrapped	k	8 Saw cut		11 None (open hole)
1 Co	ontinuous s	<b>V.</b> B		6 Wi	ire wrapped		9 Drilled holes		
2 Lo	uvered shu	itter 4 Key	punched		rch cut				
SCREEN-P	PERFORAT	ED INTERVALS:							to
									to
Gl	RAVEL PA	CK INTERVALS:							to
			From	ft to				A A	4.
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6 GROUT	MATERIAL	1 Neat cer							
6 GROUT	MATERIAI	_: 1 Neat cer							
			ment2			ntonite ft. to	4 Other		
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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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

WATER WELL RECORD Form WWC-5 KSA 82a-1212