	WATER WELL RECO	RD Form WWC-5	KSA 82	n-1212	
LOCATION OF WATER WELL: County: Dickenson	Fraction 1/4 SC 1/4	SW 1/4 Sec	tion Number		1 ° 4 🔼
Distance and direction from nearest town of	or city street address of well if	located within city?			
WATER WELL OWNER: KICK	Whitehair				
R#, St. Address, Box # : RR 5-ity, State, ZIP Code	Abilene, BS	67416	9	Application Num	
AN "X" IN SECTION BOX:	DEPTH OF COMPLETED WI epth(s) Groundwater Encounte	red 1/100	ft. ELEVA	TION:	
W NW NE E WI Es W	Pump test data: Worden Level Pump test data: Worden Hole Diameter	ell water was	pelow land su	rface measured on mo/d after hou after hou after hou and	ay/yr
	as a chemical/bacteriological satted	ample submitted to D		esNo; I	f yes, mo/day/yr sample was su es 😾 No
TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 2 PVC 4 ABS	5 Wrought iro 6 Asbestos-Co 7 Fiberglass	n 8 Concrement 9 Other	ete tile (specify belo	CASING JOINTS:	Glued Clamped
Blank casing diameter	Order of the Control	7 PV	C	10 Asbestos-	
1 Steel 3 Stainless st	3				
2 Brass 4 Galvanized CREEN OR PERFORATION OPENINGS				12 None use	
1 Continuous slot 3 Mill s		Gauzed wrapped Wire wrapped		8 Saw cut 9 Drilled holes	11 None (open hole)
2 Louvered shutter 4 Key p		Torch cut		10 Other (specify)	
GRAVEL PACK INTERVALS:	From	t. to	ft., Fro ft., Fro	m	ft. to
GROUT MATERIAL: Neat cem					ft. to
Grout Intervals: Fromft. What is the nearest source of possible con					
1 Septic tank 4 Lateral li		iw	11 Fuel	•	14 Abandoned water well 15 Oil well/Gas well
2 Sewer lines 5 Cess po		ige lagoon			16 Other (specify below)
3 Watertight sewer lines 6 Seepage				ticide storage	To Other (specify below)
Direction from well?	, pit 0 1 000,	yaro	How ma	~ .	
	LITHOLOGIC LOG	FROM	то		NG INTERVALS
0 47 YEllow	1 Red Cla	V			
47 52 Line	ed Shale	/			
52 53 Water					
53 74 Blue.	Shale				
	Shale				
	Gray Roc.	K			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- · · · · · · · · · · · · · · · · · · ·	//			
CONTRACTOR'S OR LANDOWNER'S completed on (mo/day/year)	20-90		and this reco	rd is true to the best of mon (mo/day)yr)	d under my jurisdiction and war ny knowledge and belief. Kansa
nder the business name of Baco	MAUS Dri	ling	by (signa	turk Soul 3	Backhus

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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.