				ER WELL RECORD	Form WWC-5	6 KSA 82a	-1212			
LOCATION	ON OF WAT	ER WELL:	Fraction	N.57 914 ST	ACA T Sec	ction Number	Township Nu	- AT -	Range_Nu	All the
County:	(9/10)		THE Y	A NE 1/4	Nº 1/4		T 12	_(S)	<u> </u>	(E)W
Distance a	nd direction	from nearest town	or city street	address of well if locat	ed within city?	418 W	57 979 S,	Trist		
	****		,							**************************************
2 WATER	R WELL OW	VER: MANIC	W. R. G	MAM						
		#:418 M		100	in the second	8 2 1	Board of Ag	riculture, D	ivision of Wate	r Resource:
City, State,	ZIP Code	: JanoJ.	on C.T.	1 KANSAS	6644	//	Application	Number:		
LOCATE	E WELL'S LO	CATION WITH 4	DEPTH OF	COMPLETED WELL	. <i>5</i> .7	ft. ELEVA	TION:			
AIA V	IN SECTION	l De		dwater Encountered						
ā I		I W	ELL'S STATIO	C WATER LEVEL	<i>.3.6</i> ft. b	elow land sur	face measured on	mo/day/yr		
	- NW	NE	Pun	np test data: Well wa	ter was	ft. a	fter	hours pur	nping	gpm
	- 1444	E		况 . gpm: Well wa						
- W	ı	l E Bo	ore Hole Diam	neter <i>1.0</i> in. to	o 5. 5 °			in.	to \dots	ft.
ž w	1	i w	ELL WATER	TO BE USED AS:	5 Public water		8 Air conditioning		njection well	
1	- SW	SE	1 Domestic		6 Oil field wa	The state of the s			Other (Specify b	
	1		2 Irrigation	•	Witness	The second of the second	10 Monitoring well			
	1	ı W	'as a chemical	l/bacteriological sample	submitted to D			- contrate AND from -		ole was sub
4	5	m	itted		***************************************	Wa	ter Well Disinfected	- American Company	Control of the Contro	
5 TYPE C	OF BLANK C	ASING USED:		5 Wrought iron	8 Concr	ete tile	CASING JOIN	VTS: Glued	Clamp	ed _{//}
1 Ste	el_	3 RMP (SR)		6 Asbestos-Cement	9 Other	(specify below	v)	Welde	d	A
2 PV	'C. ⁾	4 ABS	-7 (7 Fiberglass		. <i>.</i>		Threa	ded	
Blank casir	ng diameter	in.	. to Ø	7 Fiberglass ft., Dia , . , . ,	in. to)	ft., Dia	i	n. to	ft.
Casing hei	ght above la	nd surface		in., weight . <i>.冬.外</i> .	Richard Co.	A second district	ft. Wall thickness o	r gauge No)	
TYPE OF	SCREEN O	R PERFORATION I	MATERIAL:		(7.P)	<u>10</u> 2	10 Asbe	estos-ceme	nt	
1 Ste	eel	3 Stainless s	teel	5 Fiberglass	8 RN	/IP (SR)	11 Othe	r (specify)		
2 Bra	3SS	4 Galvanized	steel	6 Concrete tile	9 AE	BS	12 None	e used (ope	•	
SCREEN (OR PERFOR	NATION OPENINGS	SARE: 16	5 Gau	zed wrapped		8 Saw cut		11 None (ope	n hole)
1 Co	ntinuous slo	d (3 Mill)	slot)	6 Wire	wrapped		9 Drilled holes			
2 Lo	uvered shutt	er 4 Key	punched	7 Toro	ch cut		10 Other (specify)			
SCREEN-P	PERFORATE	D INTERVALS:								
			From	ft. to ft. to .	Con Caj	ft., Fro	m	ft. to)	
G	BRAVEL PA	CK INTERVALS:						_		
T			From	ft. to	A STATE OF THE PARTY OF THE PAR	ft., Fro				ft,
HAMILE P	MATERIAL			2 Cement grout			Other			
Grout Inter		-		Q ft., From	n.		/AD AT			
		urce of possible co		en projett.			tock pens		oandoned water I well/Gas well	weii
1 Septic tank 4 Lateral lii			, ,		11 Fuel stora		•		low)	
2 Sewer lines 5 Cess poo 3 Watertight sewer lines 6 Seepage					12 Fertilizer storage 13 Insecticide storage		16 Other (specify below)			
	-	er iines 6 Seepag ************************************	e pit	9 Feedyard			ny feet? 30			
Direction f FROM	rom weii?	10000	LITHOLOGIC	3.1.0G	FROM	TO I		UGGING II	NTERVALS	
	<u> </u>	TOD SOIL	EITHOLOGIC	burket had	1					
Ŕ	10	Brown 62	1011							
70	41	Sendy	1011							
ii/	50	Fine Soc		Califor V						
50	En org	Melican	Cend	Collins						
57	58	Bedroch								
	2.2.									
				77.74.74.74.74.74.74.74.74.74.74.74.74.7						
							99.41	The second secon		-
			····							
			W 100 11 A 100 F A 100							
Z CONT	BACTOR'S	OR LANDOWNER'S	S CERTIFICA	TION: This water well	was (1) constr	ucted V2) reco	onstructed, or (3) n	lugged und	ler my iurisdicti	on and wa
Citrates		6300		TION: This water well	was (1) constr					
completed	on (mo/day	/year) 3 <i>/</i> .	(2.7/)		The second secon	and this reco	ord is true to the be			
completed Water We	l on (mo/day Il Contractor	/year) 3 / 's License No. ,	/27/.2 YS.1	C This Water	The second secon	and this reco	ord is true to the be on (mo/day/yr)			
Completed Water We under the	on (mo/day II Contractor business na	/year)	y S. J y S. J N. PLEASE PRES	C This Water	Well Record w	and this records completed by (signate, underline or circle)	ord is true to the be on (mo/day/yr) ature)	st of my kn	opies to Kansas De	elief. Kansa