WATER WELL RECO	RD	Form WWC	:-5	Division of Wate	r Resources; App. No.	
1 LOCATION OF WATE County: DUAL TO	R WELL:	Fraction 5W1/4 SW1/4 S		Section Number	Township Number	
Distance and direction from nearest town or		ty street address of w	vell if			
located within city? \n7	N ETZYOL	d 1 aug		Latitude:	38° 56' 35	grees, min. of 4 digits)
102	U L U J	H. lawron	a	Longitude: O	15° 13′ 22	2.6"
2 WATER WELL OWNER: AXVOM UC				Elevation: 863.33 PIN, 862.88 TOC.		
City State 7ID Code				Datum:		
Lawren CLINS (COGY) Data Conection Method. Legal Survey						
3 LOCATE WELL'S 4	DEPTH OF COM	PLETED WELL) ft.	SI II	112
LOCATION WITH AN "X" IN D	enth(s) Groundwater	Encountered (1)		ft (2)	f (3)	ft.
WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered (1)						/vr. 4/10/00
N	Pump test data	a: Well water was		ft. after	hours pumping.	gpm
Est. Yieldgpm: Well water wasft. after hours pumping gpm						
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well						
W E 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)						
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) Monitoring well						
Was a chemical/bacteriological sample submitted to Department? Yes NoX :: If yes, mo/day/yrs						
Sample was submitted						
s						
5 TYPE OF CASING USE	D: 5 Wrought	Iron 8 Con	crete tile	CASINO	G JOINTS: Glued	Clamped
1_Steel 3 RMP (S	SR) 6 Asbestos	-Cement 9 Othe	er (specify	below)	Welded.	
QPVC 4 ABS	7 Fiberglass	s			Threade	d
Blank casing diameter in. to ft., Diameter in. to f						
			• • • • • • • • • • • • • • • • • • • •	.ibs./π. waii tni	ckness or guage No.	
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass PMC 9 ABS 11 Other (Specify)						
1 Steel 3 Stainless Steel 5 Fiberglass PVC 9 ABS 11 Other (Specify)						
SCREEN OR PERFORATION OPENINGS ARE:						
1 Continuous slot 3 Mill slot 5 Guazed 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)						
From ft to ft From ft to ft.						
From						
From ft. to ft., From ft. to ft.						
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete ()-2						
Grout Intervals: From						
What is the nearest source of possible contamination:						
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify						
2 Sewer lines	5 Cess pool		1 Duel st		bandoned water well	below)
3 Watertight sewer line Direction from well?	1 0 1	•		Ç	il well/gas well	
FROM TO	LITHOLOGIC		FROM	y feet?	PLUGGING INT	FRVALS
D I Con	vett.	LOG	TROW	10	TEOGORIO IIVI	LKVILD
35 clay	145/8/15 NV	LAMINY MU	HIPM	WIAWERNIS	shanil	
101	odor Stit	F. Maist	7,,,,,	70/100112	11919	7_1
	1001	71.00	, , ,			USMMUMIT
8 10 clay	144/8/11-J.	Shiff Sit. M	0191 1	oraugu <i>lor</i> oi	WY VV	NEEDES
12 15 Mu	offica w j a	nuing we	<u> </u>	h. / i / +) Tasks
13/3 San	aw con	DO ONT PIO	15 <i>1</i> 5 1	eaoisn	U_1	050
18 Sandy mad grain Nell Sorted, MWM, WET, no oder						
195 Rotis 11-Deduct						
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)						
Kansas Water Well Contractor's License No. 75 This Water Well Record was completed of (moddy/year)						
under the business name of INSTRUCTIONS: Use typewriter	MXMTY.	BULLATO, IV	<u>b</u>	y (signature)	W KUUL	
three copies to Kansas Department	or ball point pen. PLEA of Health and Environme	ASE PKESS FIRMLY and nt, Bureau of Water. Geol	Ogy Section	riy. Piease fill in blanks , 1000 SW Jackson St	s, unded tine or circle the of Suite 420. Topeka. Kansas	s 66612-1367. Telephone
three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Surte 40, 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.kdhe.state.ks.us/geo/wa	terwells.					