WATER WELL R	ECORD	Form WWC-	5	Division of Wate	er Resources; App. No.		
1 LOCATION OF V	VATER WELL:	Fraction SE 1/4 NW/4	SF 1/2 5	Section Number	Township Number	Range Number R B/W	
Distance and directi	n from nearest town or cit	w street address of we	ell if G	lobal Positioning	Systems (decimal degr		
located within city? Garage The La 34 Mills (North of Tatitude)							
//N/*			ind.	Longitude:			
2 WATER WELL C	450	Elevation:					
KK#, St. Address, I	DOX # : *		1 1	Datum:			
City, State, ZIP Code : Juntion CTy, KS 6644/ Data Collection Method:							
3 LOCATE WELL'S	S 4 DEPTH OF COMP	PLETED WELL	<i>§0</i> .	ft.			
LOCATION							
WITH AN "X" IN							
SECTION BOX:	N Pump test data: Well water wasft. after hours pumping						
Est. Yield							
WELL WATER TO BE USED AS: 5 Public water cumply 8 Air conditioning 11 Injection well							
W NW NE E Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)							
"		ustrial 7 Domesti					
SW SE							
Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs							
Sample was submitted Water well disinfected? Yes No							
S							
5 TYPE OF CASING		ron 8 Conc	rete tile	CASING	G JOINTS: Glued	Clamped	
	MP (SR) 6 Asbestos-		(specify b	pelow)	Welded		
2 PVC 4 A	BS 7 Fiberglass	0 D'			Threaded		
Blank casing diameter							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel 3 Stainless Steel 5 Fiberglass PVC 9 ABS 11 Other (Specify)							
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)							
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)							
SCREEN-PERFORATED INTERVALS: From ft. to ft.							
From							
From							
110111							
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout & Bentonite 4 Other							
Grout Intervals: From							
What is the nearest source of possible contamination: 1. Source to possible contamination:							
						16 Other (specify below)	
3 Watertight sew			2 Fertilize		l well/gas well	ociow)	
Direction from well?	1 0 1	•		•	······ gas won		
FROM TO	LITHOLOGIC		FROM	ТО	PLUGGING INTI		
0 1 1	50 Soil						
1 22 1	LOWER CILON						
22 45 /	MISTORE	(WATER)					
45 51 8	nown Shall						
57 62 4	imistand						
62 65 B	NOWN SHIP						
63 80 2	imistral						
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) 2.39.20 and this record is true to the best of my knowledge and belief.							
Kansas Water Well Contractor's License No. 45./ This Water Well Record was completed on (mo/day/year)							
under the business name of Hold (now Will Or little by (signature)							
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill to tranks, underline and the correct answers. Send top							
three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, 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/waterwells.							