WATER WELL RECORD Form WWC	C-5 KSA 82a-1212
	Section Number Township Number Range Number
istance and direction from nearest town or city street address of well if located within city	20 T 16 S R2 (DW)
	210-13. 72 1001111
WATER WELL OWNER: Loyd Lacer	
R#, St. Address, Box # : ity, State, ZIP Code : Wellsuille	Board of Agriculture, Division of Water Resources
Qn'	Application Number:
AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1. 50	ft. ELEVATION: ft. 3 ft.
	below land surface measured on mo/day/yr
	ft. after hours pumping gpm
	ft. after hours pumping gpm
W	ater supply 8 Air conditioning 11 Injection well
	water supply 9 Dewatering 12 Other (Specify below)
2 Irrigation 4 Industrial 7 Lawn and	d garden only 10 Observation well
	Department? YesNo; If yes, mo/day/yr sample was sub
\$ mitted  TYPE OF BLANK CASING USED: 5 Wrought iron 8 Con	Water Well Disinfected? Yes No  CASING JOINTS: Glued
·	crete tile CASING JOINTS: Glued Clamped
ank casing diameter	to ft., Dia in. to ft.
	D lbs./ft. Wall thickness or gauge No. 5 ch. 4 D
	PVC 10 Asbestos-cement  RMP (SR) 11 Other (specify)
	ABS 12 None used (open hole)
CREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped	• • • • • • • • • • • • • • • • • • • •
1 Continuous slot 3 Mill slot 6 Wire wrapped	9 Drilled holes
2 Louvered shutter 4 Key punched 7 Torch cut	10 Other (specify)
ONLEN-FERFORATED INTERVALS. FIGHT	ft., From
	ft., From
From ft. to	ft., From ft. to ft.
	ntonite 4 Other
rout Intervals: From . 3	10 Livestock pens  14 Abandoned water well
1 Septic tank 4 Lateral lines	11 Fuel storage 15 Oil well/Gas well
/nat is the nearest source of possible contamination:  1 Septic tank 4 Lateral lines 7 Pit privy 2 Sewer lines 5 Cess pool 8 Sewage lagoon	12 Fertilizer storage 16 Other (specify below)
3 Waterlight sewer lines 6 Seepage pit 9 Feedyard	13 Insecticide storage
irection from well?  FROM TO LITHOLOGIC LOG FROM	How many feet?  TO LITHOLOGIC LOG
0 4. Seil	10
4. 35 Yellow Send	
35 45 gray Shald	
45 65 grey Schold	
o 10 1912) Share	
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) const	
ompleted on (mo/day/year) . Hune . 4. S	and this record is true to the best of my knowledge and belief. Kansas
ompleted on (mo/day/year) . Hune . 4. S	and this record is true to the best of my knowledge and belief. Kansas was completed on (paday/yr)  by (signature)