WATER WELL RECORD	Form WWC-	5	Division		Resources; App. No. L		
1 LOCATION OF WATER WELL:	Fraction		Section N		Township Number		
County: Minni	NW1/4 NE 1/4 N	t 1/4	<u> </u>		T 15'S	R 3 (E)W	
Distance and direction from nearest town or city street address of well if Global Positioning Systems (decimal degrees, min. of 4 digits)							
located within city?  33419 West 215 St Splan, Hill K Longitude:  Longitude:							
23419 West 219	2 St. July Hil	/ KX I	Longitud	e:			
2 WATER WELL OWNER: 1113	the Testalian	' E	Elevation	ı:			
KR#, St. Address, Box # . P.D	BOx 14305	[	Datum:				
City, State, 211 Code . Kars	sus letter Mrs. 641	5 A I	Data Coll	lection N	Method:		
3 LOCATE WELL'S 4 DEPTH (	OF <del>COMP<b>∦E</b>TED</del> WELL≶	34	r.D	ft.	6-360	Racos	
LOCATION	Pingged				_	Duce	
WITH AN "X" IN Depth(s) Gro	oundwater Encountered (1).	ione.	. ft.	(2)	ft. (3)	ft.	
	WELL'S STATIC WATER LEVEL No.:ft. below land surface measured on mo/day/yr						
	Pump test data: Well water wasft. after hours pumping gpm						
	Est. YieldQgpm: Well water wasft. after hours pumping gpm						
WELL WAT	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning II Injection well						
W           E   I Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering (Specify below)							
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well (1850							
SW SE							
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs							
Sample was submitted Water well disinfected? Yes No X							
S							
5 TYPE OF CASING USED: 5 1 Steel 3 RMP (SR) 6	Wrought Iron 8 Concrete Asbestos-Cement 9 Other,	rete tile		CASING	JOINTS: Glued		
1 Steel 3 RMP (SR) 6	Asbestos-Cement 9 Other	(specify b	elow)		Welded.	112/2N	
2 PVC 4 ABS 7	Fiberglass H. D	wy.ca	74. K.	ِال	Threaded		
2 PVC 4 ABS 7 Fiberglass H.D. Poly C. L. L. Threaded.  Blank casing diameter. 1 in to 36.0 ft., Diameter in to ft., Diameter in to ft.  Casing height above land surface 36. in., Weight 501.11 lbs./ft. Wall thickness or guage No. 160.05/							
Casing height above land surface							
TYPE OF SCREEN OR PERFORATION MATERIAL: NONC 9 ABS 11 Other (Specify)							
1 Steel 3 Stainless Steel 2 Brass 4 Galvanized Steal	5 Fiberglass 7 PVC 6 Concrete tile 8 RM (SR)		sbestos-C		12 None used (open		
		) IOAs	sucsius-C	Cilicit	12 None used (open	noic)	
SCREEN OR PERFORATION OPENINGS ARE: None (open hole)  1 Continuous slot 3 Mill slot 5 Gauzed 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							
From ft. to ft., From ft. to ft.							
GRAVEL PACK INTERVALS: From							
From ft. to ft., From ft. to ft.							
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
6 GROUT MATERIAL: 1 Neat ce	ement 2 Cement grout 3 Ben	itonite 4	Other				
	ft. to .3 ft., From	ft	. to	ft.	., From	ft. toft.	
What is the nearest source of possible c		01.	1	12.1		16.04 ( '6	
·		0 Livestoc	-		ecticide storage andoned water well	16 Other (specify	
		1 Fuel stor	_			below)	
3 Watertight sewer lines 6 See Direction from well?		2 Fertilize	_		well/gas well	•••••	
	HOLOGIC LOG	FROM	TO		PLUGGING INT		
		INOIVI	10		I LOGOINO INT.	LIVALS	
	3-135 Shale	360	3	11 1	Solids Be	-40 - 1 -	
	5-243 Line	360	<u> </u>	High	Solids Be	nran. F.C	
	1-269 Shile						
15 21 Lime (36)				1 . 2	60' Boles	21 /	
21 25 Sandskar 28				6-5	CO DOIS	1179980/	
25 35 Limestone 25	7-329 Linje					<u> </u>	
35 148 Stale 32	9-334 Smle						
148 171 Lime 339	4-347 Lime				· · · · · · · · · · · · · · · · · · ·	H - III	
171 213 5hile 34	7-360 Shale						
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. 5 L This Water Well Record was completed on (mo/day/year)							
under the business name of $\frac{1}{2}$ as $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ by (signature)							
INSTRUCTIONS: Use typewriter or hall poin	t pen. PLEASE PRESS FIRMLY and Pi	RINT clearly	. Please F	In blanks	underline or circle the co	orrect answers Send ton	
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLLASE 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, 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.kdheks.gov/waterwell/index.html.							