	WATER W	ELL RECORD	Form WWC	The Principle of the Communication of the Communica	32a-1212	and completed to proper company of the following to the company parts and company of the contract of the contr	
1 LOCATION OF WATER WELL:	Fraction		1 -	ection Number		ownship Number	Range Number
County: Morris	NW1/4	N WVa	N W/4		<u> </u>	<u> 15 s</u>	<u>lr 56W</u>
Distance and direction from nearest town			3				
53/4 North on 1	1577 }	rom He	ringto	V		<u> </u>	
WATER WELL OWNER: Mach	Rickh	aeter	-				
RR#, St. Address, Box # : Rt 2	,	*				Board of Agriculture	, Division of Water Resource
	inglor	KS 674				Application Number	
LOCATE WELL'S LOCATION WITH 4	DEPTH OF COM	PLETED WELL		3.9. ft. ELE'	VATION:		
							3
A PITIW	ELL'S STATIC WA	TER LEVEL	50. ft.	below land :	surface me	easured on mo/day/	yr Mac 20.89
	Pump tes	st data: Well wat	er was	ft	after	hours	pumping gpm
www NW was on so en NE co. wo	st. Yield 20+	gpm: Well wat	ter was	ft	. after	hours	pumping gpm
							in. to8.9ft.
E BO	ELL WATER TO E	BE USED AS:	5 Public wa	ater supply	8 Air c	onditioning 1	1 Injection well
	Domestic	3 Feedlot	6 Oil field v	vater supply	9 Dew	atering 1	2 Other (Specify below)
and the SW and an and and SE are an	2 Irrigation	4 Industrial					
		eriological sample					es, mo/day/yr sample was sut
V Representation of the second	itted					Disinfected? (Yes)	
5 TYPE OF BLANK CASING USED:		Wrought iron	8 Con	crete tile			ued . 🔏 Clamped
1 Steel 3 RMP (SR)		Asbestos-Cement		er (specify be			elded
(2)PVC 4 ABS		Fiberglass			•	Th	readed
Blank casing diameter 5 in.	n 55	ft Dia					
Casing height above land surface	16 in	weight		lt.	hs/ft Wall	thickness or gauge	No SDR-26
TYPE OF SCREEN OR PERFORATION I		worgan	(7)		50./1t. **Cii	10 Asbestos-ce	
1 Steel 3 Stainless s		Fiberglass	Name of the last o	RMP (SR)			fy)
2 Brass 4 Galvanized		Concrete tile		ABS		12 None used (
SCREEN OR PERFORATION OPENINGS			zed wrapped		(8')Sa		11 None (open hole)
1 Continuous slot 3 Mill:			wrapped			lled holes	(apon nois)
	punched	7 Toro	• •				
SCREEN-PERFORATED INTERVALS:	From			80 # 1			. toft
SCHEEN-ERI CHATED INTERVALO.							. toft
GRAVEL PACK INTERVALS:							. toft
STATE OF THE PROPERTY OF THE P							:. to ft
6 GROUT MATERIAL: (1) Neat cer		Cement grout	3 Be	ntonite	4 Other	Extra Cave C	alcher at 60
							ft. to
What is the nearest source of possible co					vestock pe		Abandoned water well
①Septic tank 4 Lateral		7 Pit privy		11 Fu	uel storage	15	Oil well/Gas well
10.			aoon				Other (specify below)
3 Watertight sewer lines 6 Seepag		9 Feedyard	3		secticide s	-	
Direction from well? North	, p.,	,			many feet	•	
FROM TO	LITHOLOGIC LO	G	FROM				3 INTERVALS
O I Tohsail						A CONTRACTOR OF THE PROPERTY O	
1 25 (0000	les so.						
2.5 2 Lane	Dito Ton	·)					an y programment in the form the first of the 100 MPA
2 12 Phala	ilo						The state of the s
12 15 Lines	1100 10	aliface				7,30,30,00	
15 19 Shala	A wall	The state of the s					
19 22 Line	FA DU	in Fo	1.100.00.00		<u> </u>		and the state of t
22 39 Inale	age of a	nag					
39 40 Line	, Her	-0					
	3000					and white the tributed that the control of the cont	
	Fractuse	I taw					Secretary I among the secretary to the secretary the secretary to the secretary that the secretary the secretary that the secre
625 71 Lines	Fractive	ml lines					
23 22 Line	ign no	ya xena			_		
The state of the s	grange f	an					
12 80 Sha	u dell			-			
7 CONTRACTOR'S OR LANDOWNER'S	S CERTIFICATION	I: This water well	was(1)cons	tructed, (2) r	reconstruct	ted, or (3) plugged	under my jurisdiction and wa
completed on (mo/day/year) / l/. a.c.	<		. <i></i>	 and this r 	record is tr	ue to the best of my	knowledge and belief. Kansa
Water Well Contractor's License No	2.18,	This Water	Well Record	was complet	ted on (mo	/day/yr) /.N. o.y.	
under the business name of ZINN		***************************************		A STATE OF THE PARTY OF THE PAR	***************************************		
INSTRUCTIONS: Use typewriter or ball point pe of Health and Environment, Bureau of Water Pr	n. PLEASE PRESS FIRM otection, Topeka, Kansa	MLY and PRINT clearly. s 66620-7320. Telephor	Please fill in blar ne: 913-296-5514	iks, underline or o Send one to W/	circle the com	ect answers. Send top thr OWNER and retain one fo	ee copies to Kansas Department or your records.