mw-75	WATER WELL RECORD	Form WWC-5	KSA 82a-1212	
LOCATION OF WATER WELL: County: Franklin	Fraction ne 1/4 se 1/4 ne 1/4	Section Number	Township Number T 16 S	Range Number
Distance and direction from nearest too Located on the Franklin Co L	wn or city street address of well if locate	·	1 10	
WATER WELL OWNER: US GRR#, St. Address, Box # : 4821	eological Survey	Boa App	rd of Agriculture, Divisi	on of Water Resource
Lawit	DEPTH OF COMPLETED WELL Depth(s) Groundwater Encounte WELL'S STATIC WATER LEVE Pump test data: Well wate Est. Yieldgpm: Well wate Bore Hole Diameter.3ii WELL WATER TO BE USED AS: 1 Domestic 3 Feed lot 6 (2 Irrigation 4 Industrial 7) Was a chemical/bacteriological sample was submitted	tt, ELE ared 1dry	VATION:917.7ft. 2	.ft. 3ft. n mo/day/yr.8/11/92 npinggpm pinggpm toft. Injection well Other(Specify below) MONITORING es, mo/day/yr sample
TYPE OF BLANK CASING USE 1 Steel 3 RMP (SR) 2 PVC 4 ABS	6 Asbestos-Cement 9 C	Other (specify below)	Threa	ed .ded ^X
lank casing diameter2in Dasing Height above land surface	n. to	in. tobs./ft. Wa	.ft., Dia If thickness or gauge N	in. toft. o. sch 40
TYPES OF SCREEN OR PERFOR 1 Steel 3 Stainless 2 Brass 4 Galvanize		IP (SR) 11 Other	stos-cement (specify) used (open hole)	
	slot 6 Wire wrapped	9 Drilled holes 10 Other (specif 1t., I	romft.	toft
	Fromft. to	ft., F	romft.	toft.
rout Intervals: From2/hat is the nearest source of possit 1 Septic tank 4	ft. to0t., From	ft. to 10 Asbestos-cen 11 Fuel storage	ft., From nent 14 Abar 15 Oil w	it. tofindoned water well rell/Gas well
2 Sewer lines 5 6 3 Watertight sewer lines 6 i rection from well?	Cess pool 8 Sewage lagoon Seepage pit 9 Feedyard	12 Fertilizer store 13 None used (o How many feet?		er (specify below)
A.0 top soil 7.0 tan clay	DLOGIC LOG FROI		DEC.	VIEW 1992
			EMM SON DIME O	N OT
ONTRACTOR'S OR LANDOWNER'S of as completed on (mo/day/year)	CERTIFICATION: This water well was	1) constructed, (2) reco	nstructed, or (3) plugged e best of my knowledge a	under my jurisdiction and and belief. Kansas Water
/ell Contractor's License Nonder the business name of USGS, '			mo/day/year) 8/20/92	uli.
STRUCTIONS: Use typewriter or ball point popies to Kansas Department of Health and Environment and retain one for your records.	en. PLEASE PRESS FIRMLY AND PRINT CH	early. Please fill in blanks. L	Inderline or circle the correct lephone: 913-862-9360. Send	answers. Send top three d one to WATER WELL