100471011 0= 1111			Form WWC-5					
LOCATION OF WATER County: <b>MANON</b>		1 14 54 14 N		tion Number	Township		Range Nu	ımber €/
		eet address of well if located				3		
4 EAST		enth of Roll	•					
WATER WELL OWNE		CO RWD #1	,,					
R#, St. Address, Box #	m - 84 m 4	8			Board of	Agriculture Di	ivision of Water	r Resource
Sity, State, ZIP Code	ROXBUAY					on Number:		710000100
		OF COMPLETED WELL	25	# FLEV/A				
AN "X" IN SECTION B		oundwater Encountered 1.						
·		ATIC WATER LEVEL						
		Pump test data: Well water						
NW	• NF = = 1	32 gpm: Well water				•		
		Diameter in. to .						
w <del>                                    </del>			5 Public wate		8 Air conditionir		njection well	
:	1 Dome	CICOLI				-	ther (Specify b	nelow)
SW	- SE 2 Irriga				0 Observation v		(opoony c	•
	• • •	nical/bacteriological sample s	-	•		1 4		
<u> </u>	mitted	nous basismological sample s	abilitioa to bi		er Well Disinfec			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
TYPE OF BLANK CAS	<del></del>	5 Wrought iron	8 Concre				Clampe	ed
Steel	3 RMP (SR)	6 Asbestos-Cement		specify below			d	
2 PVC	4 ABS	7 Fiberglass			<i>,</i>	Thread	ded	
lank casing diameter	<b></b> in. to	ft., Dia						
asing height above land	surface	in., weight		Ibs./f	t. Wall thickness	or gauge No.		
	ERFORATION MATERIAL		7 PV			sbestos-cemen		
1 Steel			Fiberglass 8 RM		11 O	Other (specify)		
2 Brass	@Galvanized steel	6 Concrete tile	9 AB		_	ene used (ope		
CREEN OR PERFORAT	ION OPENINGS ARE:	5 Gauze	d wrapped		8 Saw cut	•	Mont (open	<del>minolo)</del>
Continuous slot	3 Mill slot	6 Wire v	vrapped		9 Drilled holes	,		
2 Louvered shutter	4 Key punched	7 Torch	cut		10 Other (spec	ify)		
CREEN-PERFORATED	INTERVALS: From	ft. to		ft., Fron	n	ft. to		ft
	From	ft. to		ft., Fron	n	ft. to		ft
GRAVEL PACK	INTERVALS: From	ft. to		ft., Fron	n	ft. to		ft
	From	ft. to		ft., Fron	<u>n</u>	ft. to		ft
GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bento	nite 4 (	Other			
Grout Intervals: From	.12ft. to O	ft., From	ft.	to	ft., From .		. ft. to	
Vhat is the nearest source	e of possible contaminatio	n:		10 Livest	ock pens	14 Aba	andoned water	well
1 Septic tank	4 Lateral lines	7 Pit privy	7 Pit privy		11 Fuel storage		15 Oil well/Gas well	
2 Sewer lines 5 Cess pool		8 Sewage lago	8 Sewage lagoon		12 Fertilizer storage		16 Other (specify below)	
3 Watertight sewer lines 6 Seepage pit		9 Feedyard	9 Feedyard		13 Insecticide storage			
Direction from well?	NONTHWAST		T === 1	How man	y feet? 2	000 FT		
FROM TO	LITHOLO	GIC LOG	FROM	то		LITHOLOGIC	C LOG	
	UN KNOWN		-					
			-					
			-					
			1					
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			+					
		·	ļ					
				<b></b>				
			<u> </u>					
CONTRACTOR'S OR	LANDOWNER'S CERTIFI	CATION: This water well wa						
ompleted on (mo/day/yea	ir) <b>/ 1. / 5: / 88</b> .				d is true to the b	est of my know	wledge and beli	ief. Kansa:
ater Well Contractor's Li	cense No	This Water We	ell Record wa	s completed o	on (mo/day/yr)		/ <b>&amp;8</b>	
nder the business name	of			by (signat	ure)	ile B	above .	
STRUCTIONS: Use type	writer or ball point pen. PL	EASE PRESS FIRMLY and	PRINT clearl	y. Please fill in	blanks, underlir	e or circle the	correct answers	s. Send to
ree copies to Kansas De WNER and retain one fo	partment of Health and Env	ironment, Division of Environ	ment, Environi	nental Geolog	y Section, Topek	a, KS 66620. S	send one to WA	IEK WEL