LOCATION OF V		Fraction		Form WWC-5	KSA 82a-	1212 Township Number	Range, Number
County: TRA		NW		2 14	4	т 17 9	s R /9 /6]w
Distance and direct	_ //./ 4		et address of well if located	as HA	A		
WATER WELL	OWNER: 1/	STERAL	119 Almin	DM.	HAKI	naila	ture, Division of Water Resources
RR#, St. Address,	Box # : ▼	OO BOI	KINITTE	'·	# 0 G	Byard of Agricul	ture, Division of Water Resources
City, State, ZIP Coo	de :		ItchA IK	8		Application Num	ber:
LOCATE WELL'S AN "X" IN SECT	S LOCATION WITH ION BOX: N	\vdash					. ft. 3
ī !	ĬX I						lay/yr
NW -	NE	Pu	ump test data: Well water	rwas	ft. aft	er hou	irs pumping gpm
<u> i _ </u>		1					in. toft.
₹ W I	'	WELL WATER	R TO BE USED AS:	5 Public wate	er supply 8	3 Air conditioning	11 Injection well
sw		1)Domes	stic 3 Feedlot (6 Oil field wa	ter supply	9 Dewatering	12 Other (Specify below)
:;; -		2 Irrigatio			-		,,,
	1	Was a chemic	al/bacteriological sample s	ubmitted to D	epartment? Yes	s;	If yes, mo/day/yr sample was sub-
L	\$	mitted			Wate	er Well Disinfected? You	es X No
_	K CASING USED:		5 Wrought iron	8 Concre			Glued Clamped
1 Steel	3 RMP (S	R)	6 Asbestos-Cement	9 Other	(specify below))	Welded
2 PVC	4 ABS	1	7 Fiberglass				Threaded
							in. to ft.
	e land surface						uge No SDR-26
	OR PERFORATIO			PVC 10 Asbestos-cement			
1 Steel 3 Stainless steel 5 Fiberglas							ecify)
2 Brass 4 Galvanized steel 6 Concrete SCREEN OR PERFORATION OPENINGS ARE:							ed (open hole)
	_			ed wrapped 8 Saw cut			11 None (open hole)
1 Continuous		Mill slot	6 Wire v	• •		9 Drilled holes	
2 Louvered sh	nutter	(ey punched	7 Torch	~ ~		, , , , , , , , , , , , , , , , , , , ,	4.4.
SUNEEN-FERT OT	ATED INTERVALS.	From		-			ft. toft.
GRAVELI	PACK INTERVALS:		_	_			ft. toft.
0.0	Non merchanico	From	ft. to	· 2	ft., From		ft. to ft.
GROUT MATER	IAL: 1 Neat			3 Bento			
Grout Intervals: F	rom		,				ft. to ft.
	source of possible				10 Livesto		14 Abandoned water well
1 Septic tank	Q ate		7 Pit privy		11 Fuel st	•	15 Oil well/Gas well
2 Sewer lines 5 Cess pool							16 Other (specify below)
3 Watertight sewer lines 6 Seepage pit			9 Feedyard	13 Insecticide storage		-	
Direction from well?	IUSST	~			How many	y feet? 60 /	
FROM TO	0 0 0 7	LITHOLOGI	IC LOG	FROM	ТО	PLUGGI	ING INTERVALS
							· · · · · ·
				ļ			
							
							1 , 1 ,
CONTRACTORS	S OR LANDOWNE	B'S CERTIFICA	ATION: This water well wa	ıs (1) constru	cted, ② recon	structed, or (3) plugge	d under my jurisdiction and was
completed on (mo/d	ay/year) 🎜 / 🤄	20/7/			and this record	d is true to the best of r	ny knowledge and belief. Kansas
Water Well Contract		,	This Water We	ell Record wa	s completed or	n (mo/day/yr),	8/27/9/
under the business	name of \$AIC	1EN PUR	ip & well De	Ung I	by (signatu	ire) Som far	Then I

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to answer between the property of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.