| WATER W | ELL RECORD Form WWC-5 | KSA 82a-1212 ID | No | |
|---|---|---------------------------------------|--|--|
| 1 LOCATION OF WATER WELL: Fra. County: Marian N | ction/ | Section Number | er Township Number | Range Number |
| Distance and direction from nearest town or cit | - // / | within city? | • | Ensolville |
| WATER WELL OWNER WATER | southwest come | - allendine | WIAL SULS SEC, | morarca |
| 2 WATER WELL OWNER: KINDT PRINTERS, St. Address, Box # : 915 Sev. City, State, ZIP Code : 75 pek | Harrison, 979 | Elm | Board of Agriculture, I Application Number: | Division of Water Resources |
| 3 LOCATE WELL'S LOCATION WITH 4 DEP | TH OF COMPLETED WELL | ft. ELE | VATION: | |
| WELL Est. Y | ield gpm: Well wate WATER TO BE USED AS: 5 | .\$ ft. below land surfer wasf | face measured on mo/day/yr t. afterhours p t. afterhours p 8 Air conditioning 11 II | 5//7/09 pumpinggpm |
| | chemical/bacteriological sample | submitted to Department | n) 10 Monitoring well | |
| S | | | | |
| 5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 2 PVC 4 ABS | 5 Wrought iron6 Asbestos-Cement7 Fiberglass | 8 Concrete tile 9 Other (specify belo | ow) Weld | ed Clamped |
| Blank casing diameter | | | | |
| Casing height above land surface | | | | |
| TYPE OF SCREEN OR PERFORATION MATE 1 Steel 3 Stainless Steel | ERIAL: 5 Fiberglass | 7)PVC 8 RMP (SR) | 10 Asbestos-Cen | nent ') |
| 2 Brass 4 Galvanized Stee | | 9 ABS | 12 None used (or | |
| SCREEN OR PERFORATION OPENINGS AR 1 Continuous slot | | zed wrapped wrapped | 8 Saw cut 9 Drilled holes | 11 None (open hole) |
| 2 Louvered shutter 4 Key pund | | | 10 Other (specify) | ft. |
| | m 5. 0 ft. to | | | |
| Froi GRAVEL PACK INTERVALS: Froi | m | ft., Fro | om ft. to | ft. |
| Froi | mft. to | ft., Fro | om ft. to | ft. |
| 6 GROUT MATERIAL: 1 Neat cemen | | Bentonite | 4 Other | |
| GROUT MATERIAL: 1 Neat cemen Grout Intervals: Fromft. to | | | | |
| What is the nearest source of possible contam | | | | Abandoned water well |
| 1 Septic tank 4 Lateral lines | 7 Pit privy | 11 Fue | el storage 15 (| Oil well/Gas well |
| 2 Sewer lines 5 Cess pool | 8 Sewage | lagoon 12 Fer | tilizer storage | Other (specify below) |
| 3 Watertight sewer lines 6 Seepage pit 9 Feed | | | | Later runoff |
| | LEWAY N/NE HOLOGIE LOG | | PLUGGING IN | TED\/ALC |
| FROM TO 9 LITH | 10LOGUE LOG | FROM TO | PLOGGING IN | TERVALS |
| 5 15 Tangari | and and all and | 1 4 | Benton to | <u>ـــــ</u> |
| Thin I h | ret of Shale C | 3 15 | 10/20 Sand | |
| 12' | | | | |
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| 7 | | | | المسالم المسال |
| 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) | | | | |
| Water Well Contractor's Licence No This Water Well Record was completed on (mo/day/yr) | | | | |
| under the business name of | ELL ENVIRONMEN | | y (signature) | |
| 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 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.