WATER WELL RECORD		Form WWC-		Division of Water Resources; App. No.		
1 LOCATION OF WATER WELL: County: Marion		Fraction Ness	١/،	Section Number		Range Number R EEW
Distance and direction from nearest town or city street address of well if Global Positioning Systems (decimal degree						
located within city?	Latitude:					
2 WATER WELL OWNER: Jeff Bina RR#, St. Address, Box # : 1915 275 City, State, ZIP Code : Marion, K2. 66861				Elevation:		
RR#, St. Address, Bo	x# 19152	75 the	_	Datum:		
City, State, ZIP Code	maria	n. Kg. 661	261	Data Collection	Method:	
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL ft.						
LOCATION					Un	
WITH AN "X" IN	- 1 1 - (-) (-) (-)					
SECTION BOX:	WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr					
	Est. Yield 2 — 2 pm: Well water was					
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well						
W E I Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)						
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well Ca. L.L.						
SW SE W						
Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs						
Sample was submitted						
5 TYPE OF CASING U	ICED. 6 Wasseld	0.0		CASD	IC IODITC Charl	Ol1
	JSED: 5 Wrought 1 P (SR) 6 Asbestos-			below)	IG JOINTS: Glued.	Clamped
2 PVC 4 ABS	7 Fiberglass				Threaded	
2 PVC 4 ABS 7 Fiberglass Threaded						
Blank casing diameter						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)						
SCREEN OR PERFORA) 10 A	Aspesios-Cement	12 None used (open	noie)
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)						
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)						
SCREEN-PERFORATED INTERVALS: From						
GRAVEL PACK INTERVALS: From Q D ft. to ft., From ft. to ft.						
From						
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
Grout intervals: From						
What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify						
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below)						
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well						
Direction from well?		-	low many		t.	
FROM TO	LITHOLOGIC		FROM	TO	PLUGGING INTE	RVALS
0 45 YE	2110W Clay	- Shale				
11- 60 0	· · · · · · · · · · · · · · · · · · ·					
73 00 6	ray Shak	e _r				
61 10 13	rm'e Wate	Shale				
Po Do B	nken She	e Some	1.10	100		
	UNEH STORY	22-011	Cy W			
H2 HA B.	ray Shall	0				
	7					
7 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) 5						
Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year) 3.73.22						
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PNNT</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. Visit us at http://www.kdheks.gov/waterwell/index.html.						