		WATE	R WELL RECORD	Form WWC-5	KSA 82a	-1212			
LOCATION OF WATER W		ction	• • • • • • • • • • • • • • • • • • • •		n Number			Range Number	
County: Marion			NW 1/4 NE	1	2	T 18	S	R <b>4 ©</b> W	
Distance and direction from n	mi E. f	com L	incolnville	Street addres	s ot well if	located within city?			
2 WATER WELL OWNER:	Mrs. A	nnu	Eckland						
RR#, St. Address, Box # :	RR#1	_	_			Board of Ag	riculture, Di	vision of Water Resourc	
City, State, ZIP Code	Burdio	K, Ka	nsas 668	38		Application	Number:		
DEPTH OF COMPLETED	WELL 6 3	<b>L</b> ft. В	ore Hole Diameter	<b>9</b> in. to	1.4.	ft., and	<b>6</b>	in. to <b>6. 1.</b>	
Well Water to be used as:	5 Pt	ıblic water s	upply	8 Air conditio	ning	11 Inje	ction well		
1 Domestic. 3 Feedlot			supply			12 Oth	er (Specify	below)	
2 Irrigation 4 Industria				10 Observation					
Well's static water level									
Pump Test Data						hours pumping	•	<b>.2.4</b>	
Est. Yield 30-40		valei was				hours pumping	into Olveri	. <b>X</b> Clamped	
4 TYPE OF BLANK CASING			6 Asbestos-Cement			_		. <b></b>	
1 Steel 2	RMP (SR)				-	v) 			
Blank casing dia 5 .	H ADS		7 Fiberglass	in 4-		ft Dia	mead	led	
Casing height above land sur	face	JJ	in weight	) IL 607		/ft III., Did		SDRAL ILOPSI	
TYPE OF SCREEN OR PER	FORATION MA	TERIAL:	III., weight	7 PVC	· · · · · IDS.	/π. vvali tnickness c	or gauge inc stos-comon	) <b>O.D.J.</b>	
						10 Asbestos-cement 11 Other (specify)			
			~	9 ABS	(OH)		11 Other (specify)		
Screen or Perforation Openin		<del>ce</del> i						11 None (open hole)	
_ · · · · · · · · · · · · · · · · · · ·	. •			5 Gauzed wrapped 6 Wire wrapped			9 Drilled holes		
	2 Louvered shutter 4 Key punched			··		10 Other (specify)			
Screen-Perforation Dia									
Screen-Perforated Intervals:									
		-							
Gravel Pack Intervals: None				•					
140)(	From		ft. to		From		ft. to		
5 GROUT MATERIAL:	1 Neat ceme	<u> </u>				Other			
Grouted Intervals: From									
What is the nearest source of			•			storage			
1 Septic tank	1 Septic tank 4 Cess pool		7 Sewage lagoon		<del>-</del>			well/Gas well	
2 Sewer lines	2 Sewer lines 5 Seepage pit		8 Feed yard		12 Insecticide storage		(16 Oth	er (specify below)	
3 Lateral lines			9 Livestock pens		13 Watertight sewer lines			Dry Ravine	
Direction from well	N.,	How	many feet 153		.? Water	Well Disinfected? Y	'es 🔏 .	<b>No</b>	
Was a chemical/bacteriological									
was submitted	month		day	year: Pu	mp installed	d? Yes <b>X</b>	N	o	
If Yes: Pump Manufacturer's	name 🛂 i	ndmill		Model No. 2 %	z.Cyllin	nder.HP		Volts	
Depth of Pump Intake				Pumps Capacit	-			gal./mii	
	1 Submersible			3 Jet	4 Centr		ciprocating	6 Other	
CONTRACTOR'S OR LAN									
			. month				<b>80</b>	yea	
and this record is true to the	best of my kno	wledge and	belief. Kansas Water W						
This Water Well Record was					····›	day	Ö	. year under the busine	
	Drillin	1 2	I	oy (signature)		I W. Bene		71010010100	
7 LOCATE WELL'S LOCATI WITH AN "X" IN SECTION		то :	LITHOLOG	IC LOG	FROM	1 TO	LII	HOLOGIC LOG	
BOX:	<b>~</b>		Classia	D 0 1					
N			Cleaned +	ne lased	-				
	ļ		Parket 111	41					
NW NE		<u> </u>	Existing Wo	s11					
		<u> </u>	Al Canal		1				
¥ W			No Samples	S WATIED	18				
SW SE		<del> </del>			-				
		<del> </del>							
<u> </u>									
ELEVATION:									
						7,1		-	
Depth(s) Groundwater Encou	ntered 15	<b>U</b> ft. 2	prope firmly and BBAT	olearly Places	It. fill in blooks	(Use a s		et if needed) answers. Send top three	
INSTRUCTIONS: Use typewricopies to Kansas Department	of Health and E	pen, <i>piea</i> se nvironment, l	Division of Environment,	Water Well Conti	actors, Top	eka, KS 66620. Sen	d one to W	ATER WELL OWNER and	
etain one for your records.	orrieallii and El	whomment, I	DIVISION OF ENVIRONMENT,	TTAIGI VVEII CONII		ięna, ING 00020. Gell		TI TI TI LE CIVILLI AND	