	WATE	R WELL RECO	RD Form W	WC-5 KSA 8	32a-1212					
LOCATION OF WATER WELL Fraction		Al pro Section		Section Numb	er To	wnship Nu	umber	Range Number		
ounty: Lyour	5 W 1/4		NE 1/4	35	T_		S	R	10	E/ w /5
listance and direction from nearest to	own or city? $3 {\varsigma}_{\circ}$	- 3W Em	Stree	t address of well	II if located	within city	?			
WATER WELL OWNER: DL							/			
IR#, St. Address, Box # : 13 C.	6 11200012	, <u>S</u>	1 1		F	Board of A	griculture, D	ivision of	Mater R	ecources
Sity, State, ZIP Code :	Emport	a K	6680	/			Number:			esources
DEPTH OF COMPLETED WELL				in. to						ft
Vell Water to be used as:	5 Public water s			conditioning			ection well			7
Domestic 3 Feedlot	6 Oil field water	supply	. 9 De	watering			ther (Specify	below)		
2 Irrigation 4 Industrial	7 Lawn and gard	den only		servation well		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
Vell's static water level $\dots 50$.										
ump Test Data :	Well water was									
st. Yield gpm:	Well water was		ft. after		hours p			-	,	gpm
TYPE OF BLANK CASING USED:				Concrete tile			g Joints: Glued Clamped .			
1 Steel 3 RMP (SR)				, ,	specify below)		Welded			
PVC 4 ABS	2 6	7 Fiberglass				Die	Inrea	ded		
sank casing dia										
_		in., weigr		√7 %PVC	ibs./π. waii					
/PE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel		5 Fiberglass	`	8 RMP (SR)		10 Asbestos-cement 11 Other (specify)			4	
				9 ABS		12 None used (open hole)				
Screen or Perforation Openings Are:	1200 01001	6 Concrete til	5 Gauzed wrap		8 Sav		, ,	11 None	(open h	ole)
	Mill slot		6 Wire wrapped		Oprill	led holes			(1)	,
2 Louvered shutter 4	Key punched		7 Torch cut		10 Oth	er (specify	/)			
Screen-Perforation Dia / O	in. to1.2	. 5 ft., Dia		in. to	1	ft., Dia		in to .		ft.
	25									
From.	· · · · · · · · · · · · · · · · · · ·	ft. to		ft., From			$\dots \text{ ft. to} \dots$		<i></i> .	ft.
Bravel Pack Intervals: From.	15	ft. to	1.Z5				ft. to			ft.
From		ft. to		ft., From			ft. to			ft.
		2 Cement grou		Bentonite						
Grouted Intervals: From		ft., Fro	om . ,			ft., From				
/hat is the nearest source of possible contamination: (1) Septic tank 4 Cess pool		7 Caiugga lagaan			10 Fuel storage		14 Abandoned water well			II∈ ¶
2 Sewer lines 5 Seepage pit		7 Sewage lagoon 8 Feed yard			11 Fertilizer storage12 Insecticide storag		15 Oil well/Gas well		. (
2 Lateral lines 6 Dit	6 Dit priva		O Livertack name		12 Wetertight sewer lines		16 Other (specify below)			•
Direction from well	oth How	many feet	300	2 Wa	iter Well Di	sinfected?	Yes X	No.		
Was a chemical/bacteriological sample										
vas submitted						-		-		-
f Yes: Pump Manufacturer's name			-	•						
Depth of Pump Intake			. ft. Pump	s Capacity rated	l at					gal./min.
Type of pump: 1 Subm		Turbine	3 Jet		entrifugal		Reciprocating		6 Othe	
CONTRACTOR'S OR LANDOWN	ER'S CERTIFICAT	ON: This water	er well was 🕜	constructed, (2)	reconstructe	ed, or (3)	plugged und	der my jur	isdiction	and was
completed on		. month		day		8. 1. j				year
and this record is true to the best of		belief, Kansas	Water Well Cor	ntractor's License	e No A					
This Water Well Record was complet	1 ·			10 11 11	day		Ø . /	year u	nder the	business
name of MZNEE Dail	1149	·	by (sign	/1				THO OO	10.1.00	
LOCATE WELL'S LOCATION FOR THE WITH AN "X" IN SECTION	ROM/ TO		THOLOGIC LOC		09 /	TO		ITHOLOG	L. LOG	,
BOX:	1 6		Bry.	· /,		111	15G	rcy	71	, , , , , , , , , , , , , , , , , , ,
N	4 9		ellow Thay Enc		// //	23	SHU	- 58	yd c	incy.
	9 14		ow Green					3		
NW NX	16 19	LS GI		s and		Some	E HIO	21 /	tigh	r.h.
E E	18 47	Chale	I Zac Gr	eri,		1 00 60	0161	n ve	141. 0	2 10 1 7 11
	4748	Design	45	J'		Lev	us Fo		J	
SW SE	48 83	Sheal	C Ghe	1.		- mo	115.	,		
S S	83 84	LS GL								
1 Mile	84 109	5h w:	sand Gi	134.	-					TO THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRES
ELEVATION:										
Depth(s) Groundwater Encountered	1. <i>[:[.D</i> ft.	2 ft.	. 3 f	t. 4 f	ft.		a second sh			
INSTRUCTIONS: Use typewriter or ba	all point pen, <i>please</i>	e press firmly ar	nd PRINT clearly	. Please fill in bla	anks, under	rline or circ	cle the corre	ct answers	s. Send t	op three

INSTRUCTIONS: Use typewriter or ball point pen, please press firmly and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.