	ER WELL RECOR	D Form WWC-5	KSA 82a-1212	ID No		···			
LOCATION OF WATER WELL:	Fraction	5W 1/4 S & 1/4	Section N	lumber	Township N		_	je Numb	ber
Distance and direction from nearest town				1	1 / /	<u> </u>	R		Œ/W
	nt got		•						
WATER WELL OWNER:		ropane			W3				
RR#, St. Address, Box # : 1920 City, State, ZIP Code :		iangas (do 901	•	Board of A Application				
LOCATE WELL'S LOCATION WITH	DEPTH OF COM								
N.I.	Depth(s) Groundwa WELL'S STATIC W	ater Encountered 1 ATER LEVEL	ft. below land						
	Pump t	est data: Well water	was	ft. aftei	r	hours pu	mping		gpm
NNA/ NIE	Est. Yield WELL WATER TO	gpm: Well water	wasublic water supply		r Air conditioning				gpm
	1 Domestic		il field water suppl omestic (lawn & ga						<i>i</i>)
W E	2 Irrigation	4 Industrial 7 D	omestic (lawn & ga	arden) (10)	Monitoring wel	l			
Was a shorthearbacteriological sample submitted to bepartment: Tes, if yes, morady yes sample							ampie w No	as sub-	
S									
TYPE OF BLANK CASING USED:		Wrought iron	8 Concrete tile	W	CASING JO	INTS: Glued	Cla	amped	
1 Steel 3 RMP (SR) 2 (VC) 4 AB <u>S</u>		Asbestos-Cement Fiberglass	9 Other (specif			-	d ded		
Blank casing diameter									
Casing height above land surface									
TYPE OF SCREEN OR PERFORATION			7(PVc			oestos-Ceme			
1 Steel 3 Stainless 2 Brass 4 Galvanize		Fiberglass Concrete tile	8 ŘMP (SR 9 ABS	1)		ier (Specify) ne used (ope			
SCREEN OR PERFORATION OPENING		5 Guaze	d wrapped	8	Saw cut	•	11 None (open ho	ole)
1 Continuous slot 3 Millslot 6 Wire wrapped 9 Drilled holes						•	.		
	y punched	7 Torch							
SCREEN-PERFORATED INTERVALS:	From	2ft. to	ftft	t., From		ft. to .			ft.
GRAVEL PACK INTERVALS:		ft. to ft. to							
	From	ft. to	ft	t., From		ft. to .			ft.
GROUT MATERIAL: 1 Neat		2 Cement grout	(3)Bentonite		thereV.				
Grout Intervals: From		ft., From							
What is the nearest source of possible of 1 Septic tank 4 Latera		7 Pit privy		0 Livestock	pens age		andoned v		əll
2 Sewer lines 5 Cess		8 Sewage la		2 Fertilizer			her (specif		'n
3 Watertight sewer lines 6 Seepa	•	9 Feedyard		3 Insecticid	_				,
Direction from well?			. н	low many fe					
FROM TO	LITHOLOGIC LC	G C	FROM TO)	PLU	JGGING INT	ERVALS		
0 10.5NS1174	Jay, DY	DWY TO	JEVE DI	COLON	maki	plas	गया	74-	
41 pive	aveen c	Sine Ity	Ve St	ZINIA	a (ivo	O N'V	te)	<u> </u>	
	J. 44 . 0	,,,,,			S CVC	CLUPIC	* <i>J</i>		
10.5 20' Mard	shale b	secvock,	olivegy	een,	FRAC	epet	· od	OR	_
				1	11/2/1	^^ A A A A	1		
				-	MASON	NM ON	Ц		
				M	1111012	- VNA	\mathcal{A}	. / 	or Int
				1 10	· · · · · · ·	() U	· tro	70/00
					<u></u>				
	*								
CONTRACTOR'S OR LANDOWNER	S SERTIFICATION								
ompleted on (mo/day/year)	757	This Water V	and				wledge and	belief.	Kansas
nder the business name of	• /	- 1	LC	by (sign		11/1	LIII	10	
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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, 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.