- A	WAT	TER WELL RECORD F	orm WWC-5 KSA 82	2a-1212	
LOCATION OF WATER	WELL Fraction		Section Number		Range Number
County: Lyon.	SW 1/2	SW 14 SE	1/4 0	T /9 s	R // E000
Distance and direction from	nearest town or city? 12 So Emponi	a 99 Ha	Street address of well i	if located within city?	
WATER WELL OWNER	Larry Pape				
D# St Address Boy #	· 10 10 - LL	F		Board of Agriculture	, Division of Water Resources
City, State, ZIP Code	Emponia K	55, 66801		Application Number	NA
DEPTH OF COMPLETE	ED WELLft.	Bore Hole Diameter	D in. to 4	/ ft., and	in. to ft.
Vell Water to be used as:	5 Public water	supply	8 Air conditioning	11 Injection we	ell
① Domestic 3 Feedle	ot 6 Oil field water	* * *	9 Dewatering	12 Other (Spe	cify below)
2 Irrigation 4 Indust			10 Observation well		
Vell's static water level				nonth \dots \mathcal{J} \mathcal{O} \dots \dots	
	: Well water was. gpm: Well water was			hours pumpinghours pumping	gpm
TYPE OF BLANK CAS	ING USED:	5 Wrought iron	8 Concrete tile	Casing Joints: Glu	ied . 🗶 Clamped
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify belo	ow) We	lded
@ PVC	, 4 ABS	<u> </u>			eaded
					in. to ft
Dasing height above land	surface	4 in., weight			e No . 3/8
	ERFORATION MATERIAL:		7 PVC	10 Asbestos-cer	
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)		y)
2 Brass	4 Galvanized steel		9 ABS	48%	open hole)
Screen or Perforation Oper			d wrapped	(8)Saw cut	11 None (open hole)
1 Continuous slot	3 Mill slot	6 Wire w	rapped	9 Drilled holes 10 Other (specify)	min 202
	4 Key punched	7 Torch			
A Company of the Comp	······································	π., Dia	tt From	π., υια	in to
Screen-Perforated Intervals					
Bravel Pack Intervals:	From	,.ft. to	ft., From .		
GROUT MATERIAL:	From (1) Neat cement	ft. to 2 Cement grout	ft., From 3 Bentonite		
					ft. to
1254	e of possible contamination:	-			Abandoned water well
1 Septic tank	4 Cess pool				Oil well/Gas well
2 Sewer lines	5 Seepage pit	8 Feed yard		•	Other (specify below)
3 Lateral lines	6 Pit privy	9 Livestock per		r water traper control of the con-	
Direction from well		w many feet		er Well Disinfected? Yes	No
Was a chemical/bacteriolog	gical sample submitted to D	epartment? Yes		۷o 🖟	If yes, date sample
was submitted	month	day	year: Pump Instal	led? Yes	. No 🗶
f Yes: Pump Manufacturer	's name		Model No		Volts
Depth of Pump Intake		ft.	Pumps Capacity rated a	at	gal./min.
Type of pump:	1 Submersible	2 Turbine		ntrifugal 5 Reciproca	
-		- CO			under my jurisdiction and was
	<i>6</i>	-			yéar
and this record is true to the	he best of my knowledge ar				
This Water Well Record w	as completed on	<i>€</i> m	onth3. by (signature) AM	day	year under the business
The state of the s	Duilling + met		y (signature)		
Z LOCATE WELL'S LOC WITH AN "X" IN SEC BOX:	TION 0 3	LITHOLOG 7.5 BJK		OM TO	LITHOLOGIC LOG
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NW NE	1 24 31	Sand + Gra	1021		· · · · · · · · · · · · · · · · · · ·
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SW SE	-				
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ELEVATION:	- 1	Arrana de la companya della companya della companya de la companya de la companya della companya	The second secon	· · · · · · · · · · · · · · · · · · ·	
	countered 1 9 h	t. 2 3 Ø ft. 3		// // // // // // // // // // // // //	object if position
Depth(s) Groundwater End INSTRUCTIONS: Use type					sheet if needed) rrect answers. Send top three
copies to Kansas Departme	ent of Health and Environmer	nt, Division of Environment,	Water Well Contractors, T	opeka, KS 66620. Send one t	WATER WELL OWNER and
retain one for your records	2.	and the same of th	distribution of the state of th	and the state of t	and the second s