		_		ER WELL RECORD	Form WWC-			Da M
		TER WELL:	Fraction	15	Se	ction Numbe) <u>a</u>	Range Number
County:	CHAS	E		4 NE 1/4 SE		17	T IM S	R 9 E/W
Distance a	and direction	from nearest tov	wn or city street	address of well if located	a within city?			
		VNER: PALE	AICHE D	ANCH				
WATER	H WELL ON	VNER: PACE x # : RT. I	150x 48	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Board of Agriculture	, Division of Water Resources
HH#, 51. /	Address, Bo	STPA	NG CITY	KS 66869	Application Number:			
7	, ZIP Code							
B LOCATE AN "X"	IN SECTIO	N BOX:						
		N					2	yr
₹ l	1			-			•	
-	WW	NE	1	r				pumping gpm
1	1			- -				pumping gpm
. w -	<u> </u>	E					and	
-	1							
1 -	- SW	-X SE	1 Domestic				9 Dewatering10 Monitoring well	
	1	!	2 Irrigation			-		
ł L			I .	/bacteriological sample s	submitted to L	•	·	es, mo/day/yr sample was sub
- D/DE (25 DI ANIK (SACING LICED.	mitted	E Manualt inna	8 Conci		/ater Well Disinfected? Yes	No No led Clamped
_		CASING USED:	·D\	5 Wrought iron				elded
1 Ste		3 RMP (S 4 ABS	n)	6 Asbestos-Cement		(specify belo	· ·	eaded
2 PV			in 40	7 Fiberglass				in. to ft.
=	=	R PERFORATIO		in., weight			./n. waii inickness or gauge	No
				5 Fiberglass		-		
1 Steel 3 Stainless steel 2 Brass 4 Galvanized steel				6 Concrete tile	8 RMP (SR) 9 ABS		11 Other (specify)	
		RATION OPENIN			•	00	8 Saw cut	11 None (open hole)
	ontinuous sk		fill slot		5 Gauzed wrapped 6 Wire wrapped		9 Drilled holes	i i None (open noie)
	uvered shut		ey punched	7 Torch				
		ED INTERVALS:				4 5.		toft,
OO! ILLIN	LIII OIIAI	LD INTERIVALO:						toft.
c	BRAVEL PA	CK INTERVALS:						toft.
•			From	ft. to		ft., Fro		to ft.
6 GROUT	MATERIAL	.: 1 Neat o	cement	2 Cement grout	⊘ Bento	nite 4	Other	
Grout Inter	vals: Fro	m 4.5	.ft. to	ft From	ft.	to.	ft From	ft. toft.
What is the	e nearest so	ource of possible	contamination:	.,		∂ Live		Abandoned water well
1 Septic tank 4 Lateral lines				7 Pit privy	-		storage 15 Oil well/Gas well	
2 Sewer lines 5 Cess pool			pool			ilizer storage 16 Other (specify below)		
3 Wa	atertight sew	er lines 6 Seep	age pit	3 3			cticide storage	
Direction fr	rom well?			•			any feet?	
FROM	то		LITHOLOGIC	LOG	FROM	ТО		INTERVALS
0	4.5	TOP:	SOIL					
					4.5	5	BENTONIT	E
5	10		OIL + R	ock				
10	23	GRAU	EL					
]		
						<u> </u>		
						<u> </u>		
CONTR	ACTOR'S	OR LANDOWNER	R'S CERTIFICAT	IQN: This water well wa	ıs (1) constru	cted, (2) rec	onstructed, or Delugged un	nder my jurisdiction and was
 completed	on (mo/day/	year) 🗙 🖇 🗀	28-9	7		and this reco	ord is true to the best of my k	nder my jurisdiction and was nowledge and belief. Kansas
Nater Well	Contractor'	s License No		This Water We	ell Record wa	s completed	on (mo/day/yr) X /) .	8-28-991
	ousiness na						ature) X Yourau	I mulies
INSTRUC	CTIONS: Use tv	pewriter or ball point r	pen. PLEASE PRESS I	FIRMLY and PRINT clearly. Plea	ise fill in blanks	underline or circl	e the correct answers. Send ton three	e conjes to Kansas Department
of Health	and Environm	ent, Bureau of Water,	Topeka, Kansas 6662	20-0001. Telephone: 913-296-55	45. Send one to	WATER WELL O	WNER and retain one for your recor	ds.

KSA 82a-1212