WATE	R WELL	RECORD		Form WW	C-5			r Resources; App. No.		
		FWATER WI ARSHAL		Fraction SW 1/4 NW1/4	5W1/4	Section N	umber	Township Number T / S	Range Number R E W	
Dista	nce and dir	ection from nea	rest town or cit	v street address of	well if		-	Systems (decimal de		
locate	located within city? / WEST & 5 14 NORTH OF BREMAN						Latitude:			
2 WA	WATER WELL OWNER: ELLEN MCCOMB						Longitude:			
RR#	RR#, St. Address, Box # : 256 /87 RD.						Elevation:			
City,	City, State, ZIP Code : HANOVER KS 66945						Data Collection Method:			
3 LOC	3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL						ft.			
1	LOCATION									
	WITH AN "X" IN Depth(s) Groundwater Encountered (1)									
SEC	N Pump test data: Well water was								gpm	
l FTT	Est. Yield									
NV	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 12 Other (Specific below)									
w										
: SW	SW SE Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs									
Sample was submitted										
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued										
		ING USED: 3 RMP (SR)	5 Wrought 1		oncrete tile her (specify		CASING		Clamped	
		4 ABS	7 Fiberglass	is						
Blank casing diameter in. to										
Casing height above land surface										
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)										
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)										
SCREEN OR PERFORATION OPENINGS ARE:										
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)										
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From										
From ft. to ft., From ft. to ft.										
GRAVEL PACK INTERVALS: From										
From ft. to ft., From ft. to ft.										
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other										
Grout In	tervals:	From 5	ft. to	ft., From		. ft. to	fi	t., From	ft. toft.	
1		source of possi			10 T '	1	12 7		16 04 (
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (speci 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below)										
1		sewer lines _6		9 Feedyard	12 Fertili	izer Storage	15 Oi	il well/gas well		
		1? NOR				ny feet?	3.O.			
FROM	TO		LITHOLOGIC	LOG	FRON	1 TO		PLUGGING INT	ERVALS	
31 31 39	3/	BROWN	BROUN	CIAV						
3/	31	YELLUW		CLHT						
79	44	REDS								
44	59		TONES	SHALE						
44 59	62	GRAY	SHALE							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION; This water well was (1) constructed, (2) reconstructed, or (3) plugged										
under my jurisdiction and was completed on (mo/day/year)										
			icense No5.	.た.の This Wa	ter Well Re	cord was co	ompleted	on (mo/day/year)	F. SULL.	
INSTRUC	e business	se typewriter or bal	l point pen. PLEA	SE PRESS FIRMLY at	nd PRINT clea	y (signatur arly. Please fi	ll in blanks	s, underline or circle the c	orrect answers. Send top	
three copi	es to Kansas	Department of Heal	lth and Environmen	nt, Bureau of Water, G	eology Section	n, 1000 SW Ja	ickson St.,	Suite 420, Topeka, Kansas	s 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. Visit us at http://www.kdheks.gov/waterwell/index.html.										