			CSZ SE NW					
LOCATION OF V	VATER WELL:	Fraction	ER WELL RECORD	Form WWC-!	5 KSA 82a ction Number	-1212 Township Number	Range Number	
county: Mac	rion	NCMA	V4 - 1/4 M	1/4	5_	T 20 5	s R 9 -4 0 V	
			address of well if local					
			ewood he	one.				
WATER WELL	OWNER: Edwa	and Co	stello					
RR#, St. Address,	Box # : 230	Tunglen	rood Lane			Board of Agricult	ture, Division of Water Resource	
City, State, ZIP Coo	ie : m_{lpha}	yrion, I	59, 668	61		Application Num	ber:	
LOCATE WELL'S	LOCATION WITH	4 DEPTH OF	COMPLETED WELL	50	ft. ELEVA	TION:		
AN "X" IN SECT	ION BOX:	Depth(s) Groun	ndwater Encountered	1, 41	ft. 2	2	. ft. 3	
	1						ay/yr 4-21-94	
							rs pumping gp	
NW.7	X NE						rs pumping gp	
<u>•</u>		Bore Hole Diar	neter. 🔑 😄in. to	o6.D		and	in. to	
w	1 '	WELL WATER	TO BE USED AS:	5 Public water	er supply	8 Air conditioning	11 Injection well	
- I	!	1 Domesti	c 3 Feedlot	6 Oil field wa	iter supply	9 Dewatering	12 Other (Specify below)	
3W -	- 3:	2 Irrigation	4 Industrial	7 Lawn and	garden only	10 Monitoring well		
i		Was a chemica	l/bacteriological sample	submitted to D	epartment? Ye	esNoX; I	f yes, mo/day/yr sample was s	
	S	mitted			Wat	ter Well Disinfected? Ye	es X No	
TYPE OF BLAN	K CASING USED:		5 Wrought iron	8 Concr	ete tile	CASING JOINTS:	Glued Clamped	
1 Steel	3 RMP (S	SR)	6 Asbestos-Cemen	t 9 Other	(specify below	v)	Welded	
2 PVC	,4 ABS	- 1	Fiberglass # Dia				Threaded	
Blank casing diame		.ip.yo ・ゴミ	5 ft., Dia . 🥱 .	in. to	<u>.</u>	ft., Dia	in to	
Casing height above	e land surface	12	in., weight	assil.	6. <i>O</i> lbs./f	ft. Wall thickness or gau	ige No 2/.4	
TYPE OF SCREEN	OR PERFORATIO			Z PV		10 Asbestos		
1 Steel	3 Stainles	ss steel	5 Fiberglass	8 RM	MP (SR)	11 Other (sp	ecify)	
2 Brass	4 Galvania	zed steel	6 Concrete tile	9 AE	s	12 None use	d (open hole)	
SCREEN OR PERF	ORATION OPENIN	NGS ARE:	5 Gau	zed wrapped		8 Saw cut	11 None (open hole)	
1 Continuous	slot 3 M	∕lill slot	6 Wire	wrapped		9 Drilled holes		
2 Louvered sh	nutter 4 K	Key punched	7 Toro					
SCREEN-PERFOR	ATED INTERVALS:	From	. ft. to .	3.0	ft., Fron	m	. ft. to	
		From					, ft. to	
GRAVEL	PACK INTERVALS	: From	2. O ft. to .	<i>5.0</i>	ft., Fror	m	. ft. to	
		From	ft. to		ft., Fror	<u>n</u>	ft. to	
GROUT MATER	\sim	cement	2 Cement grout					
Grout Intervals: F	rom <i>U</i>	.ft. to	? ft., From	ft.	to	ft., From	ft. to	
What is the nearest source of possible contamination:					p	14 Abandoned water well		
1 Septic tank 4 Lateral lines			7 Pit privy		storage	15 Oil well/Gas well		
2 Sewer lines 5 Cess pool		•	8 Sewage la	goon	12 Fertilizer storage		16 Other (specify below)	
3 Watertight sewer lines 6 Seepa		page pit	9 Feedyard	13 Insecticide		ticide storage		
Direction from well?					How man	ny feet?		
FROM TO	, ,	LITHOLOGIC	CLOG	FROM	ТО	PLUGGI	NG INTERVALS	
0 12	Lim	<u>e</u>						
10 00	0/							
12 21/	Clay	/						
A . ///	+ h	0,			ļl.			
27 91	1500	Shall	<u>e </u>				and the same of th	
111 110	1.,							
41 42	Wat	er						
11 4 100	10	0.			ļ			
42 50	Gray	Sha	10					
	/		##···				4 444 (****	
			Υ'					
							and the second s	
	00 1 4410004/15	D'S CEDTIEICA	TION: This water well y	was (1) constru	cted. (2) reco	nstructed, or (3) plugge	d under my jurisdiction and wa	
J CONTRACTOR'S	S OH LANDOWNE	אייער דורו דו ביט ביערו	Typia. This water well					
ONTRACTOR'S Completed on (mo/d)		2729						
	ay/year) . 7	2129	9		and this recor	rd is true to the best of r		
empleted on (mo/d	ay/year)	2109	9	Well Record wa	and this recor	rd is true to the best of r	ny knowledge and belief. Kansa	

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. <u>Please</u> fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.