			ALEH MELL HE	JOHD	Form WWC	<u>-5 KSA</u>	82a-12	212 ID No)				
	TON OF WA		Fraction W 1/4	Qui	, Qo) 1/	Section	on Number	<i>(</i>	ip Number	Range Number		
		from pearest to	wn or city street		of well if locate	ed within c	ity?		l T	/ s	R / EW		
FAC	rity	Gpe.	sse/	1-6						,			
2 WATER	R WELL OW	NER: Norm	a Schmi	45									
RR#, St. A City, State,	ddress, Box , ZIP Code	# : 130)	lasy essel			053				of Agriculture, [tion Number:	Division of Water Resource	ıs	
		CATION WITH	4 DEPTH OF				2	ft. ELEVAT	TON:				
AN "X" II	N SECTION N	BOX:	Depth(s) Grou	ndwater I	Encountered	Ø1	23	ft.	2	ft. ş	2-15-05 tt		
`	I	ı	Pu	mp test o	⊓LEVEL lata: Wellwa	∡T ater was	. Delow	riand surface	e measured or fter	n mo/day/yrd hours r	pumping gpi	 m	
	-NW	- NE	Est. Yield .∕ ⊊	?dl	ipm: Well wa	ater was		ft. a	fter	hours p	oumping gpi	m	
	1/44	- 145	WELL WATER	TO BE U	JSED AS:	5 Public w	ater su	pply	8 Air condition	ning 11 li	njection well		
w	1	E	1 Domestic 2 Irrigation		eedlot ndustrial	6 Oil field 7 Domesti			9 Dewatering) 12 (well	Other (Specify below)		
• •	!	-	g	• •		Pomodi	O (ICIVI)	a dardon)	ro montoning	WOII		•••	
_	-sw	- SE	Was a chemic	el/hacteri	nlogical samo	le suhmitte	d to De	nartmant? V	oe No.	C Hyan r	no/dov/vro comple was out	_	
Was a chemical/bacteriological sample submitted to Depa									Water Well Disinfected Yes No				
		<u> </u>											
5 TYPE	OF BLANK (CASING USED:		5 Wro	ught iron	8.0	oncrete	tile	CASING	JOINTS: Glue	ed Clamped	_	
1 Stee		3 RMP (S	R)		estos-Cement			pecify below)			ded		
2 PVC		4 ABS		るFibe	rglass			•••••	•••••	Thre	aded	••	
	-		in. to	2.7	ft., Dia	70 0		.in, to	ft.	, Dia	ge No	t.	
	•	ind surface		in.,	weight	ice S	-X.L.	<i>60</i>	lbs./ft. Wall thi	ckness or gua	ge No. 😂	٠.,	
		R PERFORATIO 3 Stainles	ON MATERIAL:	5 Fibe	ralago		7 PVC 8 RMP	(CD)					
1 Stee 2 Bras		4 Galvani			rgiass crete tile		o RIVIP 9 ABS	(on)		None used (or	/) nen hole)	•••	
		RATION OPENII	NGS ARE:			lazed wrap			8 Saw cut				
	tinuous slot		Aill slot			ire wrappe			9 Drilled ho	les	11 None (open hole)		
	vered shutte		ey punched	h	7 To	rch cut					f	t.	
SCREEN-I	PERFORATI	ED INTERVALS		2 4	ft. to	35	<u> </u>	ft., From		ft. tc)f	t.	
,	0041/51 04	01/ INTERNAL 0	From		ft. to		·····	ft., From .	•••••	ft. to)f)f	t.	
,	GHAVEL PA	CK INTERVALS	From	#	ft. to			ft., From .		ft. to)f)f	t.	
				***************************************			••••••	II., FIOIII .	•••••	It. 10)T	τ.	
6 GROL	JT MATERIA		it cement		ement grout	3	Bentor	nite 4	Other				
Grout Inter				Z.D1	t., From	•••••	ft. to		ft., From .	•••••	ft. tof	t.	
What is the nearest source of possible contamination:							10 Livestock pens			s 14 Abandoned water well			
1 Septic tank 4 Lateral lines					7 Pit privy			11 Fuel storage			Oil well/Gas well		
2 Sewer lines 5 Cess pool									Fertilizer storage 16 Other (specify below)				
3 Watertight sewer lines 6 Seepage pit Direction from well?									icide storage				
FROM	TO	<u> </u>	LITUOLOGI	0100		FDG			y feet? 32			_	
PROW	4	10/0	LITHOLOGI	C LOG		FRC	IMI	ТО		PLUGGING IN	ITERVALS	_	
		Ciary	<u>/</u>									_	
b	0	Sand						-					
			_						,				
9	23	Red :	Showle	7				-		· · · · · · · · · · · · · · · · · · ·			

23	32	San	d									_	
											· · · · · · · · · · · · · · · · · · ·		
32	50	Blue	Sha	10								_	
						- ·							
7										 ,		_	
∠ CONTR	ACTOR'S C	R LANDOWNE	B'S CERTIFICA	TION: TI	nis water well	was (1) c	onstruc	ted. (2) reco	nstructed, or (3) plugged un	der my jurisdiction and wa nowledge and belief. Kansa	ıs	
Completed (on (mo/day/y Contractor/o	Licence No									nowledge and belief. Kansa	ıs	
	usiness nam		- 1-1				cora w		d on (mo/day/)		200 D		
		שונו	CKH V		PRINT clearly Pla		ko unda-			Tall to	s to Kansas Department of Health	=	
		or wan point pt		THE CITY		Jaco an III Didli	no, unudi		Joineol aliewels. 30	3114 CODIO	OTTRAM TO TRAININGUES ASSESSOR OF		

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Pleased 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.