| 1  |   | R WELL RECORD               | Form WWC-5               | KSA 82a                        |                          |  |                         |
|--|---|-----------------------------|--------------------------|--------------------------------|--------------------------|--|-------------------------|
| LOCATION OF WATER V                              | •   |                             |                          | ion Number                     | Township Nur             |  | Range Number            |
| County: Marion                                   | V NW 1/4  | NE 14                       | 5W1/4                    | 19                             | T 21                     | <u>s  </u>                                     | R 4 €W                  |
|  | nearest town or city street a   |                             |                          | 01                             | 1 6                      | guared   | ( acc )                 |
| 3/2 Easl &                                       |   |                             | dge of                   | rea boo                        | <i>y</i> (3              | guares   | 011                     |
| WATER WELL OWNER:                                |   | eterson                     |                          |                                |                          |  |                         |
| RR#, St. Address, Box # :                        |   | 1.)                         |                          |                                |                          | riculture, Divis                               | sion of Water Resources |
| City, State, ZIP Code                            | Marion  | Kansas                      | 6680                     | <u> </u>                       | Application              | Number:  |                         |
| LOCATE WELL'S LOCAT<br>AN "X" IN SECTION BO      | TON WITH 4 DEPTH OF C   |                             |                          |                                |                          |  |                         |
| <del>.                                    </del> |   | WATER LEVEL                 |                          |                                |                          |  |                         |
| i  |   |                             |                          |                                |                          |  | ng gpm                  |
| NW   |   |                             |                          |                                |                          |  | ng gpm                  |
| !!!!   |   |                             |                          |                                |                          |  | ing gpin                |
| * w   1   1   X                                  | <del></del>   |                             |                          |                                |                          |  |                         |
| ξ "   ¦ <b>X</b>                                 | i     📥   | TO BE USED AS:              | 5 Public water           |                                |                          | •  | ction well              |
| sw   | SE Domestic   |                             | 6 Oil field water        |                                |                          |  | er (Specify below)      |
|  | 2 Irrigation  | 4 Industrial                |                          |                                |                          |  |                         |
| \ <u> </u>                                       | Was a chemical  | bacteriological sample      | submitted to De          |                                |                          |  | /day/yr sample was sub- |
| <u> </u>   | mitted  | ,                           |                          |                                | ter Well Disinfected     |  | No                      |
| TYPE OF BLANK CASIN                              |   | 5 Wrought iron              | 8 Concre                 | te tile                        | CASING JOIN              | TS: Glued . 🗸                                  | XClamped                |
|  | 3 RMP (SR)  | 6 Asbestos-Cement           | 9 Other (                | specify below                  | <b>(</b> )               | Welded .                                       |                         |
| @PVC   | 4 ABS   | 7 Fiberglass                |                          |                                |                          |  | j                       |
| Blank casing diameter                            | <i>5</i> in. to   | <i>⊋.∤.</i> ft., Dia        | in. to                   |                                | ft., Dia                 | in. 1  | to ft.                  |
| Casing height above land su                      | urface  | .in., weight                |                          | Ibs./1                         | ft. Wall thickness or    | gauge No                                       | SDR-26                  |
| TYPE OF SCREEN OR PE                             | RFORATION MATERIAL:   | -                           | <b>∂</b> PV0             |                                | 10 Asbe                  | stos-cement                                    |                         |
| 1 Steel  | 3 Stainless steel   | 5 Fiberglass                | 8 RMI                    | P (SR)                         | 11 Other                 | (specify)                                      |                         |
| 2 Brass  | 4 Galvanized steel  | 6 Concrete tile             | 9 ABS                    |                                |                          | used (open l                                   |                         |
| SCREEN OR PERFORATION                            | N OPENINGS ARE:   | 5 Gau                       | zed wrapped              |                                | 8 Saw cut                | 11   | None (open hole)        |
| 1 Continuous slot                                | 3 Mill slot   |                             | wrapped                  |                                | 9 Drilled holes          |  |                         |
| 2 Louvered shutter                               | 4 Key punched   | 7 Toro                      | • • •                    |                                | 10 Other (specify)       |  |                         |
| SCREEN-PERFORATED IN                             |   |                             |                          |                                |                          |  |                         |
| SOMEEN EM SHATED IN                              |   |                             |                          |                                |                          |  |                         |
| GRAVEL PACK IN                                   |   |                             |                          |                                |                          |  |                         |
| GRAVEL PACK IN                                   | From  | ft. to                      |                          | ft., Fror                      |                          |  | ft.                     |
| GROUT MATERIAL:                                  | Neat cement   | 2 Cement grout              | 3 Bentor                 |                                |                          |  |                         |
|  | O ft. to  |                             |                          |                                |                          |  |                         |
|  |   | → .❤. π., From              |                          |                                |                          |  | doned water well        |
| What is the nearest source                       |   | 7. Div                      |                          |                                | ock pens                 |  |                         |
| 1 Septic tank                                    | 4 Lateral lines   | 7 Pit privy                 |                          | 11 Fuel storage                |                          | 15 Oil well/Gas well  16 Other (specify below) |                         |
| 2 Sewer lines                                    | 5 Cess pool   | 8 Sewage lagoon             |                          | 12 Fertilizer storage 16 Other |                          | (specify below)                                |                         |
| 3 Watertight sewer line                          |   | 9 Feedyard                  |                          |                                |                          | /. CC + E. H. !                                | . <del></del>           |
| Direction from well?                             | Well in ]   | asture                      | FROM                     | How mar                        |                          | IGGING INTE                                    | DVALC                   |
| FROM TO  | LITHOLOGIC  |                             | FROM                     | , TO                           | 1 50                     | dana mil                                       | ITTALO                  |
| <del></del>                                      | + Well we   | is re-con                   | structa                  | 1                              |                          |  |                         |
|  | No Log  |                             |                          |                                | <del></del>              |  |                         |
| <del></del>                                      | <u> </u>  |                             |                          |                                |                          |  |                         |
|  | #3  |                             |                          |                                |                          |  |                         |
|  |   |                             |                          |                                |                          |  |                         |
|  |   |                             |                          |                                |                          |  |                         |
|  |   |                             |                          |                                |                          |  |                         |
|  | 1, 1, 1   |                             |                          |                                |                          |  |                         |
|  |   |                             |                          |                                |                          |  |                         |
|  |   |                             |                          |                                |                          |  |                         |
|  |   |                             |                          |                                |                          |  |                         |
|  |   |                             |                          |                                |                          |  |                         |
|  |   |                             |                          |                                |                          |  |                         |
|  |   |                             |                          |                                |                          |  |                         |
|  |   |                             |                          |                                |                          |  |                         |
|  |   |                             |                          |                                |                          |  |                         |
|  | ANDOWNER'S CERTIFICAT   |                             |                          |                                |                          |  |                         |
| completed on (mo/day/year)                       | 210   |                             |                          |                                |                          |  | edge and belief. Kansas |
| Water Well Contractor's Lice                     |   |                             | Well Record was          |                                | on (mo/day/yr) . 그       | UN   | 28.9                    |
| under the business name of                       |   | ater We                     | 11 Drl                   |                                |                          | fl a.  | Jenn                    |
| INSTRUCTIONS: Use typewrite                      | er or ball point pen. <u>PLEASE PRESS</u><br>ureau of Water Protection, Topeka, K | FIRMLY and PRINT clearly.   | Please fill in blanks, u | inderline or circle            | the correct answers. See | d top three copies                             | s té-Kansas Department  |
|  | was at Makey Destantian Tanaka Ka   | ancae 66620,7320. Talanhoni | - 014-296-5514 Sen       | αone to WATER                  | WELL OWNER and reta      | on one for your re                             | SAUCIS.                 |