		 	32a-1212	
LOCATION OF WATER WELL:	NW 14 NE 14 /V	Section Numb	per Township Number T S	Range Number
county: () 350 county: ()	city street address of well if located	within city?	1 01 5	
60 NE Crede	er Point	•		
WATER WELL OWNER: GE 376	1 Carpenter,			
R# St. Address. Box # : ビルソダク	_	1111	Board of Agriculture	, Division of Water Resource
ty, State, ZIP Code : Code	rroint. KS 61	6843	Application Number	
LOCATE WELL'S LOCATION WITH 4	DEPTH OF COMPLETED WELL	4 0 . YA ft. ELE	VATION:	· · · · · · · · · · · · · · · · · · ·
N Dep	oth(s) Groundwater Encountered 1.	·	π. 2 π.	-3 <u> </u>
WEI	LL'S STATIC WATER LEVEL . 🦪.	4 ft. below land	surface measured on mo/day/y	/r4: - :3 -9 5
- NW - NE			t. after hours (
Est.	. Yield 🍮 gpm: well water			
	e Hole Diameter	•		in. to
I I I WE	_	5 Public water supply		1 Injection well
SW SE (9 Dewatering 12	
	-		y 10 Monitoring well	
	s a chemical/bacteriological sample s			
TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	Water Well Disinfected? Yes	No
1 Steel 3 RMP (SR)	6 Asbestos-Cement	9 Other (specify be		lded Clamped
2)PVC 4 ABS	7 Fiberglass	, , ,	· .	eaded
lank casing diameter 8 in. t			ft., Dia	
asing height above land surface				
YPE OF SCREEN OR PERFORATION MA	• -	⊘ PVC	10 Asbestos-cer	
1 Steel 3 Stainless stee		8 RMP (SR)		y)
2 Brass 4 Galvanized s	_ •	9 ABS	12 None used (• •
CREEN OR PERFORATION OPENINGS	ARE: 5 Gauze	ed wrapped	8 Saw cut	11 None (open hole)
1 Continuous slot 3 Mill slo	ot 6 Wire v	vrapped	9 Drilled holes	
2 Louvered shutter 4 Key pu	unched 7 Torch	cut	10 Other (specify)	
CREEN-PERFORATED INTERVALS:	From 2.4 ft. to		10 Other (specify) ft.	toft
F	From ft. to	ft., اسيخ . من در رو ا	From ft. From ft.	toft
GRAVEL PACK INTERVALS:	From \mathcal{Z} . \mathcal{A} ft. to			toft
······	From ft. to			to ft
GROUT MATERIAL: Neat ceme	ent Cement grout o /	3 Bentonite	4 Other	
rout Intervals: From				
1 Septic tank 4 Lateral lin			vestock pens 14 uel storage 15	Abandoned water well
2 Sewer lines 5 Cess poo		_		Other (specify below)
3 Watertight sewer lines 6/Seepage			secticide storage ا	Cities (specify below)
/1/ /2	Th.		many feet?	• • • • • • • • • • • • • • • • • • • •
rection rem went	ITHOLOGIC LOG	FROM TO		INTERVALS
O / TSoil				
7 28 CL Brow				
1 28 CL Broy 28 30 Graves	+Sand			
30 40.5 White L.	ine			
· .				
		<u> </u>		
CONTRACTOR'S OR LANDOWNER'S Completed on (mo/day/year) 5-15	CERTIFICATION: This water well wa	as 0 constructed, (2) r	econstructed, or (3) plugged u	nder my jurisdiction and wa
empleted on (mo/day/year) 5	-45	and this re	ecord is true to the best of my	
ater Well Contractor's License No				1/p.7.7.5
nder the business name of MCNUC	Urilling + Meta	115. by (sig	gnature) SC NSN	e
INSTRUCTIONS: Use typewriter or ball point pen. <u>F</u> of Health and Environment, Bureau of Water, Tope	PLEASE PRESS FIRME and PRINT clearly. Please, Kansas 66620-0001. Telephone: 913-296-5	ase fill in blanks, underline or o 545. Send one to WATER WEL	circle the collect answers. Send top three	ee copies to Kansas Department rds.