WATER WELL RECORD		Form WWC-5		Division of Wate	er Resources App. No	0,
1 LOCATION OF WATER WELL:		Fraction	λi	Section Number	Township No.	Range Number
County: Harvey		1/45 / 1/45	1/4 IV Vy1/4		TQLS	R / CE W
Street/Rural Address of Well Location; if unknown, distance & direction				Global Positioning		
from nearest town or intersection: If at owner's address, check here .				Latitude: (in decimal degrees)		
				Longitude: (in decimal degrees)		
3 W 4 S Malton				Elevation:		
2 WATER WELL OWNER: VACAB Probacker			Collection Method:			
RR#, Street Address, Box #: 3 R Lean Cropped			GPS unit (Make/Model:)			
3 W J S Malton 2 WATER WELL OWNER: Made Brubacher RR#, Street Address, Box #: 3 R Legal Crecent City, State, ZIP Code : Newton, Kabilla			☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey			
	New	von Kat	7117	Est. Accuracy: <	3 m, □ 3-5 m, □	5-15 m, □ >15 m
3 LOCATE WELL WITH AN "X" IN	A DEPTH OF	אירונאט אוינויינון עמונאאראי	. Fl) Ca		
SECTION BOX:	ON DOLLAR STATE OF THE STATE OF					
N	WELL'S STATIC WATER LEVEL					
Pump test data: Well water wasft. afterhours pumping						ay/yıax
EST. YIELD. J.C. gpm. Well water wasft. after					hours pump	nino onm
SWSE Domestic Feedlot Oil field water supply Dewatering Other (Specify below the control of the contro						
Irrigation Industrial Domestic-lawn & garden Monitoring well						
Was a chemical/bacteriological sample submitted to Department? Yes No						
S If yes, mo/day/yr sample was submitted						
Water well disinfected? Ves No						
5 TYPE OF CASING USED: Steel PVC Other						
CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in. to ft., Diameter in. to ft. Casing height above land surface in., Weight Casing height above land surface in., Weight Casing height height of the casing height height of the casing height above land surface in., Weight Casing height height of the casing height height of the casing height height of the casing height of t						
Casing diameter						
Casing height above land surface in., Weight D. T. Libs./ft., Wall thickness or gauge No						
TIPE OF SCREEN OR PERFORATION MATERIAL:						
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)						
☐ Brass ☐ Galvanized Steel ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:						
Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)						
Louvered shutter Key punched Wire wrapped Asaw cut Other (specify)						
SCREEN-PERFORATED INTERVALS: From						
From						
GRAVEL PACK INTERVALS: From						
From						
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other.						
Grout Intervals: From						
process proces						
☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below) ☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well						
Watertight sewer lines, Seepage pit Feedyard Fertilizer storage Oil well/gas well						
Direction from well	<i>N.F</i>		. Distance	from well . <i>I.O.O.</i> 1	1000-100°	
FROM TO	LITHOLOGI	IC LOG	FROM	TO LITHO. LO	OG (cont.) <u>or</u> PLU	GGING INTERVALS
0 12 Sand	dy Clay	/				AMA A STATE OF THE
	' '					
12 35 Grav	Shale	**************************************				
	<u> </u>					
35 50 Blue	Shale				4444464	
50 52 Crun	noled Se	bale L Wa	ten			
10 0 10					***************************************	
32 20 13/0	2 Shai	10			Y14-16-V	
7 CONTRACTORS OR LANDOWATERS OF DESCRIPTION OF THE STATE						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year)						
under my jurisdiction and was completed on (mo/day/year)						
Kansas Water Well Contractor's License No. 13 This Water Well Record was completed on (mo/day/year) 2 11 12 under the business name of 13 act 14 12 by (signature) 2 11 11 12 by (signature)						
INSTRUCTIONS: Has transmit	ar or hall noint no	DIEACE DDESC EIDAG	L. J. J. G	by (signature)	MM. H. D.A	garan
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367.						
Telephone 785-296-5524. Send	one conv to WATI	ER WELL OWNER and	retain one for w	ur recorde Include for	of \$5.00 for each or	onetweeted well Visit us at