	WATER WELL RECO	PRD Form WWC-5	KSA 82a-12	12 IU NO	•	
LOCATION OF WATER V		Me 14 MW 14	Section	Number	Township Number	Range Number
Distance and direction from n			ithin city?			S I R & CENT
3N/E	Walton		-			
WATER WELL OWNER:	Wesley Ha	mm				
RR#, St. Address, Box # : City, State, ZIP Code :	Watton, K	\$ 67151			Application Num	ture, Division of Water Resources ber:
LOCATE WELL'S LOCATION	ON WITH 4 DEPTH OF CO		125			
AN "X" IN SECTION BOX:	Depth(s) Ground	water Encountered		ft.	2 managered on maldage	rt. 3 4 2 9 0 3 tt.
<b> X</b>	Pum	p-test data: Well water	was	ft. at	fter h	ours pumping gpm
NW NE						ours pumpinggpm
1 1	WELL WATER T		ıblic water su I field water s		8 Air conditioning 9 Dewatering	11 Injection well 12 Other (Specify below)
w ! !	E 2 Irrigation	4 Industrial 7 Do	omestic (lawn	& garden) 1	0 Monitoring well	
Was a chemical/bacteriological sample submitted to Department? Yes; If was, mo/day/yrs sample was sub						
	mitted			vva	ter Well Disinfected?(Y	es No
S TYPE OF PLANT CASH	C LICED:	F Marine Co.			0.00000	
TYPE OF BLANK CASING 1 Steel 3		5 Wrought iron 6 Asbestos-Cement	8 Concrete 9 Other (st	e tile pecify below)		: Glued Clamped
2 PVC 4	ABS `	7 Fiberglass			<b></b>	Threaded
Blank casing diameter	5in. to	ft., Dia,	5	in. to	<b>₹ /</b> ft., Dia	ft.
Blank casing diameterin. toin. to						
_	FORATION MATERIAL: Stainless Steel	5 Fiberglass	7 PVC		10 Asbesto	s-Cement pecify)
1 Steel 3 2 Brass 4	5 Fiberglass 8 RMP (SR) 6 Concrete tile 9 ABS			•	ed (open hole)	
SCREEN OR PERFORATION OPENINGS ARE: 5 Guazed wrapped 8 Saw cut 11 None (open hole)						
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes						, ,
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)						
SCREEN-PERFORATED INT						
GRAVEL PACK INT						ft. to
		ft. to		ft., From .		ft. toft.
GROUT MATERIAL:	1 Neat cement .	2 Cement grout	2 Rontor	nito 4	Othor	
Grout Intervals: From	1-	_				ft. toft.
What is the nearest source of		,		10 Livesto		14 Abandoned water well
1 Septic tank	4 Lateral lines	7 Pit privy		11 Fuel st	orage	15 Oil well/Gas well
2 Sewer lines 5 Cess pool		8 Sewage la	wage lagoon 12 Fertilizer storage		er storage	16 Other (specify below)
3 Watertight sewer lines	9 Feedyard					
Direction from well?	\\\\\			How many		
FROM TO	LITHOLOGIC		FROM	то	PLUGGI	NG INTERVALS
0 13- 0	10cy + 4e110	w Shale				
15- 0	one Wa	ti Ou				
7 - 3	one or w					
15- 92 B	ray LBIVE	Shale				
	_					
42 95- 1	roken Sh	alerWai	ter			
12.5 10.1 5	2/ 2 0/	1 -				
43-125- 13	lve Sha	10				
	· · · · · · · · · · · · · · · · · · ·					
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year)						
ompleted on (mo/day/year)	4-24-0-	3		and this rec	ord is true to the best of	my knowledge and belief. Kansas
This water well decord was completed on (mo/day/y)						
under the business name of Backhus Dnill-no by (signature Saul) Backhus						
INSTRUCTIONS: Use typewriter or	ball point pen PLEASE PRESS FIE	MIV and PRINT clearly Please fi	l in blanke under	ine or circle the o	orrect answers. Send ton three	a conject to Kanaga Danartment of Health

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