	WATER WELL	RECORD Form \	WWC-5 KSA 82a	-1212	
LOCATION OF WATER WELL:	Fraction		Section Number	Township Number	Range Number
County: Marion	SE 45W	14 SE 1/4	18	T22 S	R 5 (E)W
Distance and direction from nearest town of					_
Bnile North &			survs		<u>.</u>
· ~ /	ryin Nit	engale			
RR#, St. Address, Box # : RE	<i>1</i> .			Board of Agriculture,	Division of Water Resources
City, State, ZIP Code : Bu	irus, Ks	66840		Application Number:	
WE NOT THE WE	epth(s) Groundwater End ELL'S STATIC WATER Pump test dat	countered 1	3. ft. below land sur	TION: 2. ft. 6 face measured on mo/day/yr fter hours pu fter hours pu	3
e w l l l Bo	ore Hole Diameter ELL WATER TO BE US	ど in. to SED AS: 5 Publ		and	to
SW SE	•			10 Monitoring well	
Wa Wa	_		-	esNoX, If yes	
	tted	9		ter Well Disinfected? (Fes)	No
TYPE OF BLANK CASING USED:		ght iron 8	Concrete tile		d 🔀 Clamped
1 Steel 3 RMP (SR)		-	Other (specify below		led
②PVC 4 ABS	7 Fiber			Thre	
Blank casing diameter					
Casing height above land surface					
TYPE OF SCREEN OR PERFORATION M			(7)PVC	10 Asbestos-ceme	
1 Steel 3 Stainless ste			8 RMP (SR))
2 Brass 4 Galvanized	· ·	=	9 ABS	12 None used (or	
CREEN OR PERFORATION OPENINGS		5 Gauzed wrag		(8) Saw cut	11 None (open hole)
1 Continuous slot 3 Mill s		6 Wire wrappe	•	9 Drilled holes	11 None (open note)
	punched	7 Torch cut	•	10 Other (specify)	
CREEN-PERFORATED INTERVALS:	From 2. 4	ft. to		n ft	toft.
				m	toft.
GROUT MATERIAL: 1 Neat cem	nent 2 Cemer	····		Other	
		From	ft to	ft., From	ft to ft
What is the nearest source of possible con					bandoned water well
1 Septic tank 4 Lateral li	-	Pit privy		storage 15 C	
2 Sewer lines 5 Cess por		Sewage lagoon		=	Other (specify below)
3 Watertight sewer lines 6 Seepage	_	Feedyard		ticide storage Barn	Vara
Direction from well?	1 11 0	crel Plumma	_	ilondo otorago	
	d With Dai LITHOLOGIC LOG		IOM TO	PLUGGING I	NTERVALS
100	1. sek sessaes/		,,,,		
MADE AS	- A C - A C - C - C -	16-11-11-1		a com a a lad	401
	50 11	- vem l	H) ()	1110	
Dalland	net this	01	4 0 0	D (100 /	10000
57/4	# 85		unge un		gion C
	20 05	-			
CONTRACTOR'S OR LANDOWNER'S	CERTIFICATION: This	water well was (1) of	constructed 😰 reco	nstructed, or (3) plugged und	der my jurisdiction and was
completed on (mo/day/year) Nov.	2 <i>90</i>		and this reco	rd is true to the best of my kn	owledge and belief. Kansas
Vater Well Contractor's License No		This Water Well Rec	ord was completed o	on (mo/day/yr) NOY	10 40
nder the business name of Z/N	/ Water Wi	ell Dola	by (signat	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1. Desir
INSTRUCTIONS: Use typewriter or ball point pen. of Health and Environment, Bureau of Water, Top			blanks, underline or circle	the correct answers. Send top three	