WATER WELL RECORD				Form WWC-5		Division of Water Resources; App. No.		
Coun	ty: H 🚜	WATER WE	,	Fraction SW 1/4	NW/4	Section Number	Township Number	Range Number R
th (2 WAT RR#,	ed within city	Jewto OWNER: F Box#	Rober	ty street address of eadow bro t Drake adow bro	ok Un ok Un	Latitude: Longitude: Elevation: Datum:	ing Systems (decimal de	
W X	ATE WELL ATION H AN "X" II FION BOX: N NE S S	Depth(s) WELL'S Est. Yie WELL V 1 Dome 2 Irrigat Was a ch Sample v	Groundwater S STATIC WAPump test data eld.	n: Well water was. n: Well water was. EE USED AS: 5 Pudlot 6 Oil fie lustrial 7 Dome	blic water substic (lawn 8)	below land surfaft. afterft. aftersupply 8 Apply 9 Degarden 10 M		gpm gpm gpm jection well ther (Specify below) If yes, mo/day/yrs
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued. Clamped								
Grout In What is 1 S 2 S 3 V		From		7 Pit privy 8 Sewage lagoon 9 Feedyard	10 Livest 11 Fuel st 12 Fertiliz	ft. to	. ft., From	ft. toft. 16 Other (specify below)
65	67 C	Blue	Shale	haler h	lati	2^		
under the INSTRUC three copie 785-296-53	e business na CTIONS: Use t es to Kansas Dep 522. Send	me of ypewriter or ball partment of Healt	point pen. <u>PLEA</u> h and Environmen WELL OWN	ASE PRESS FIRMLY and nt, Bureau of Water, Geo	by b	y (signatur) ly. Please fill in bla , 1000 SW Jackson S	istructed (2) reconstructed to the best of my knowledge (mo/day/year) shows, underline or circle the st., Suite 420, Topeka, Kansa \$5.00 for each construct	correct answers. Send top as 66612-1367. Telephone