		w	ATER WELL REC	CORD	Form V	VWC-5	KSA 82a	a-1212	ID No				
1 LOCATION OF WATER WELL: Fraction							Section Number			Township No	ımber	Range Number	
County:	BUTK	er	NW 14	Nw	1/4	NW 1	4	36		T~ 23 S	s <b>36</b>	R <b>4</b>	<u>(E)</u> w
			own or city street				•	- •					
	miles	nof	- POTW.	in	<u>2 m:1</u>	TS &	2.	miksi	1 on	Shumu	my		
2 WATER	R WELL OW	1121	Th Rock	n		• •					,		
City, State,	ddress, Box , ZIP Code	# : 606 : Bur	rns Kunsa	30 +12 5	6684	0				Application	Number:	ision of Wate	
3 LOCATE	WELL'S LC	CATION WITH	4 4 DEPTH OF	COMPLE	TED WE	LL	7.0	ft. El	EVATIO	N:			
	N SECTION		Depth(s) Grou	ndwater IC WATE	Encounte R LEVEL	ered	1ft. be	low land s	ft. 2 surface m	neasured on mo	ft. 3 /day/yr <b>.9</b> :	12-06	ft.
×	1	1								r			
	-NW -	- NE	WELL WATER							r Air conditioning		ction well	gpm
w	1	! ! !	1 Domestic 2 Irrigation	3 F	eedlot ndustrial	6 (	Oil field water	er supply	9	Dewatering Monitoring well	12 Oth	er (Specify b	,
SW SE Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs sa									'dav/vrs samı	ole was sub-			
	5	1	mitted		Ü	·		·		Well Disinfecte			No
5 TYPE	OF BLANK (	CASING USED	);	5 Wro	ught iron		8 Conc	rete tile		CASING JOI	NTS: Glued	Clam	ped
1 Stee	6 Asbestos-Cement 7 Fiberglass			9 Other (specify below)				Welded	l ed				
			in. to										
Casing hei	ight above la	and surface		in.,	weight			•••••	lbs	./ft. Wall thickne	ss or guage	No	
			ON MATERIAL:				7 PVC			10 Asbestos-Cement 11 Other (Specify)			
1 Steel 3 Stainless Steel 5 Fiberglass 2 Brass 4 Galvanized Steel 6 Concrete tile							8 RMP (SR) 9 ABS				er (Specify) e used (oper		•••••
2 Bras				8 COII					,		` '	•	
SCREEN OR PERFORATION OPENINGS ARE: 5 Guaz 1 Continuous slot 3 Mill slot 6 Wire							ed wrapped vrapped			3 Saw cut 3 Drilled holes		1 None (ope	in noie)
	vered shutte		Key punched			7 Torch				Other (specify	)		ft.
SCREEN-I	PERFORATI	ED INTERVALS			ft	. to		ft l	From		ft. to		ft.
			From		ft	. to		ft., l	From		ft. to		ft.
(	GRAVEL PA	CK INTERVAL											
			From		tt	. to		ft., l	rom		ft. to		tt.
6 GROL	JT MATERIA	L: { Ne	at cement	2 C	ement gr	out	3 Bei	ntonite	4 0	ther			
Grout Intervals: From ft. to ft.,							ft.	ft. to		. ft., From		ft. to	ft.
What is the nearest source of possible contamination:								10 I	_ivestock	ock pens 14 Abandoned		andoned wate	er well
1 Septic tank 4 Lateral lines 7 F						it privy	rivy 11 Fuel			age	15 Oil	well/Gas wel	I
2 Sewer lines 5 Cess pool					8 Sewage lagoon 12 Ferti				_		er (specify be	•	
3 Watertight sewer lines 6 Seepage pit 9 Feeds										e storage		<b></b>	
Direction fr							I		many fe		PTIC TO	OR MOT	训练工
FROM	ТО		LITHOLOGIC	C LOG			FROM	ТО	$\perp$		GGING INTE	RVALS	
	-						70'	30'		ravel			
	<del> </del>						30'	20 1	4	3 en tonit	<u>e</u>		
							20'	61		Year Cal	men7		
								-					
· · · · · · · · · · · · · · · · · · ·													
7 CONTR	ACTOR'S C	R LANDOWNI	ED'S CERTIFICA	TION: T	nis water	well wa	s (1) const	ructed, (2)	reconst	ructed, or (3)	ugged under	my jurisdict	ion and was
completed of	on (mo/day/y	rear) <b>/.2</b> <del></del>	ED'S CERTIFICA					and ti	nis record	d is true to the be	st of my kp	vledge and b	elief. Kansas
			734		This	Water \	Well Record	d was com	pleted or	n (mo/day/yr) .	12,00	T 196	
	usiness nam		ewit sel	716/	Flu		45101		by (sigr	<u> </u>	ule 1	[Kout	#
INSTRUCT	ΓΙΟΝS: Use type	writer or ball point p	pen. <i>PLEASE PRESS F</i>	FIRMLY and	PRINT clea	ıriy. Please	fill in blanks, u	nderline or cir	cle the corre	ect answers. Send to	three copies to	Kansas Departm	ent of Health

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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 <u>constructed</u> well.