	WATER	WELL RECORD	Form WWC-5	KSA 82a	-1212		
LOCATION OF WATER WELL:	Fraction	SA M	W/ Sec	tion Number	Township Number	Range Number	
County: O () County: Distance and direction from nearest tow	up or city atreat and	7000 of wall if land	tod within city?	-/	1 7 23,s	R O OW	
Distance and direction from hearest tow		ress of well if loca		Bar	ич		
WATER WELL OWNER:	Ka Wil	SON	P = 1	11	6720	2	
RR#, St. Address, Box # :	NEVVIL		Rout	17	Board of Agriculture	Division of Water Resources	
City, State, ZIP Code	1 9 S	Bur	n5 1	Kan	Application Number	:	
LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF CO	MPLETED WELL.	105	. ft. ELEVA	TION:		
AN A IN SECTION BOX.						3	
		_				yr	
NW 7 NE						pumping gpm	
!						pumping gpm in. to	
* w 	WELL WATER TO	- //	5 Public wate			1 Injection well	
	1 Domestic	3 Feedlot			9 Dewatering 1	•	
SW SE	2 Irrigation						
	Was a chemical/ba			-	,	es, mo/day/yr sample was sub	
S	mitted				ter Well Disinfected? Yes		
TYPE OF BLANK CASING USED:	5	Wrought iron	8 Concre	ete tile	CASING JOINTS: GIL	ied XClamped	
1 Steel 3 RMP (SI	R) 6	Asbestos-Cemen	t 9 Other	(specify below	,	elded	
2) PVC 4 ABS	. 60T	' Fiberglass				readed	
Blank casing diameter			//			, in. to ft.	
Casing height above land surface /		., weight	1.6.0	Ibs./		•	
TYPE OF SCREEN OR PERFORATION MATERIAL:		Eiborglass	PVC 8 RMP (SR)		10 Asbestos-cement		
1 Steel 3 Stainless steel 2 Brass 4 Galvanized steel		•		, ,	, ,	er (specify)	
2 Brass 4 Galvanized steel SCREEN OR PERFORATION OPENINGS ARE:		6 Concrete tile 9 ABS 5 Gauzed wrapped		3	12 None used (open hole) 8 saw cut 11 None (open hole)		
	lill slot		e wrapped		9 Drilled holes	Tr Hone (open hole)	
	ev nunched	7 Ton	ch cut	_	10 Other (specify)		
SCREEN-PERFORATED INTERVALS:	From	ft. to	104	5 ft., Fro	m ft	. to	
	From	ft. to		ft., Fro	m ft	. toft.	
GRAVEL PACK INTERVALS:	From	ft. to				. toft.	
	From	ft. to				to ft.	
GROUT MATERIAL: 1 Neat of Second Intervals: From	\sim	Cement grout				4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
What is the nearest source of possible		it., From	π.			ft. to ft. Abandoned water well	
1 Septic tank 4 Lateral lines		7 Pit privy		11 Fuel		Oil well/Gas well	
O Comme Page 1			• •		-	Other (specify below)	
3 Watertight sewer lines 6 Seepage pit Sirrection from well?		9 Feedyard			ticide storage		
Direction from well?	Bas			How ma	/ /		
FROM TO	LITHOLOGIC LC)G	FROM	ТО	PLUGGING	INTERVALS	
8 301							
S COCK	5						
15/30 5/13/	3 / / //						
10 100 DHALE		72_					
		W 1 / V			A NAME OF THE PARTY OF THE PART		

	- 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	WAT THE		<u> </u>	CHECKE TO A CONTRACT OF STREET	<u> </u>	
					(A)		
CONTRACTOR'S OR LANDOWNER	R'S CERTIFICATION	N: This water well	was(1) constru				
completed on (mo/day/year) 6/./.	57.Z0			and this reco	rd is true to the best of my	nder my jurisdiction and was	
CONTRACTOR'S OR LANDOWNER completed on (mo/day/year)	57.Z0			and this reco	rd is true to the best of my on (mo/day/yr)		

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, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.