6)	WATER V	VELL RECORD	Form W	VC-5 KSA 8	2a-1212			
County: Parter Well:	raction NW ₄	SW 1/4	NEVA	Section Number	er Towns	hip Number	Range N	lumber
Distance and direction from nearest town or	city street addre	ess of well if loca	ated within o	ity?	echi.	f		
WATER WELL OWNER:	f 29	I down to the second		<u> </u>	COM			
RR#, St. Address, Box # :		_			Boar	d of Agriculture, D	Division of Wate	er Resources
City, State, ZIP Code : Mic	hota	LC .			Appl	ication Number:		
LOCATE WELL'S LOCATION WITH 4 DI AN "X" IN SECTION BOX:								
N Depti WEL NE - NW - NE - Est. Bore WEL SW - SE - SE - Was	Pump te Pump te Yield	ATER LEVEL st data: Well w	ater was ater was to	ft. below land s . ft ft ft. water supply d water supply and garden only to Department?	after	ion well	mping	gpm gpm ft.
S mitte					Vater Well Disi		No.	
TYPE OF BLANK CASING USED:		Wrought iron		oncrete tile	CASIN	IG JOINTS: Glued		l l
1 Steel 3 RMP (SR)		Asbestos-Cemer	nt 9 O	ther (specify be	low)	Welde	ed	
2 PVC 4 ABS	7	Fiberglass				. Threa	nded	
Blank casing diameter	. 3 E C	ART .						,
Casing height above land surface		weight		lb	s./ft. Wall thick	ness or gauge No	Ď	
TYPE OF SCREEN OR PERFORATION MA	feriau\ / /	- THE RESERVE AND ADDRESS OF THE PARTY OF TH	water-out	7 PVC	1	0 Asbestos-ceme	nt-	
1 Steel 3 Stainless stee		Fiberglass	8	RMP (SR)	1	1 Other (specify)		
2 Brass 4 Galvarized st		Concrete tile	Ş	ABS	1	2 None used (op	en hole)	
SCREEN OR PERFORATION OPENINGS A	RE:	5 Ga	uzed wrapp	ed	8 Saw cu	t	11 None (ope	∍n hole)
1 Continuous slot 3 Mill slot	;	6 Wii	re wrapped		9 Drilled	noles		
2 Louvered shutter F 4 Key pur			rch cut		,	specify) ft. to		
GRAVEL PACK INTERVALS: F	romrom nt 2 0	ft. to	3 E	ft., F ft., F Bentonite ft. to 10 Liv 11 Fu 12 Fe	rom	14 AI 15 O 16 O	o	ft. ft. ft. ft.
Direction from well?	TUOL 0010 L &		1		nany feet?		ii vaa -	
FROM TO LI	THOLOGIC 100	G	FRO	M TO	+DI	LITHOLOG	IC LOG	-A
0 2 700 30	9. /				W/IA/A	11100	Moth	$M \setminus M$
					1147	J-HH-f	haring filling	44\
7-18 (IPAO)	- IAIA				0 //		/	
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P de la constant de l								
CONTRACTOR'S OR LANDOWNER'S C								
	265					the best of my kno		əlief. Kansas
			Well Recor		/ /	yr)	Commence	zower.
under the business name of Almer			and DDMT		nature)		Ter	J Caradia
INSTRUCTIONS: Use typewriter or ball point three copies to Kansas Department of Health	nd Environmen	t, Division of Envi	ronment, En	vironmental Geo	logy Section, T	opeka, KS 666 2 0.	Send one to W	ATER WELL
OWNER and retain one for your records.					e-	l.		