<u> </u>	WAT	ER WELL RECORD FO	orm WWC-5	KSA 82a-	1212		
I LOCATION OF WATER W			Sec	ion Number	Township Nu		Range Number
County: 54 (Courte			1/4	ଏଥ	T 25	s	R (EW
Distance and direction from				)			
	s south of	Sunny do	We K	5			
2 WATER WELL OWNER:	Tem Oacksol	$\sim$ $\delta$					
RR#, St. Address, Box # :	7677 6. 01	3)-			Board of Ad	riculture. Div	ision of Water Resources
City, State, ZIP Code	元				Application Number:		
LOCATE WELL'S LOCATE AN "X" IN SECTION BOX	ON WITH 4 DEPTH OF	COMPLETED WELL	. 1.8	ft ELEVAT	rion:		
N	Depth(s) Groun	dwater Encountered 1					
Ŧ		C WATER LEVEL					
NW 1	VE Pur	np test data: Well water	was ./. 🕗.	ft. af	ter . <b>/ ②</b>	hours pump	oing gpm
		gpm; Well water					
* w 1		neter /. /in. to	/. <b>ຜ</b>	ft., a	ınd	in. t	o
₹ "   !	WELL WATER	TO BE USED AS: 5	Public water	supply 8	8 Air conditioning	11 ln	ection well
1 S\A' .	1 Domesti	3 Feedlot 6	Oil field wat	er supply	9 Dewatering	12 OI	her (Specify below)
J 377 = 1 = 2	2 Irrigation	4 Industrial 7	Lawn and g	arden only 1	0 Observation wel	J.,	
	Was a chemica	l/bacteriological sample sul	bmitted to De	partment? Ye	sNo	🤽; If yes, m	no/day/yr sample was sub
S Grant and an advantage of the state of the	mitted			Wat	er Well Disinfected	l? Yes	No
5 TYPE OF BLANK CASING	G USED:	5 Wrought iron	8 Concre	te tile	CASING JOIN	NTS: Glued .	. Clamped
1 Steel	8 RMP (SR)		9 Other (	specify below			
	4 ABS	7 Fiberglass	•		<u>.</u>		ed
Blank casing diameter	. <b>5</b> in. to . 8						
Casing height above land su							
TYPE OF SCREEN OR PER		. This, worght . The winds .	7 PV			estos-cement	· <del></del>
	3 Stainless steel	5 Fiberglass	and the second s	P (SR)			
	4 Galvanized steel	6 Concrete tile	9 ABS	District Control of the Control of t		e used (oper	
SCREEN OR PERFORATIO				· ,			
1 Continuous slot	THE RESIDENCE OF THE PARTY OF T	5 Gauzed	• • • • • • • • • • • • • • • • • • • •		8 Saw cut		1 None (open hole)
	a Mill slot	6 Wire wr	• •		9 Drilled holes		
2 Louvered shutter	4 Key punched	7 Torch c	450				
SCREEN-PERFORATED IN		<b>5</b> ft. to					
والمراجعة والمتار الاستحالات يستنج							
GRAVEL PACK IN		7 ft. to /	<b>O</b>				and the second s
	From	ft. to		ft., Fron	******		fte
6 GROUT MATERIAL:	1 Neat cement	Cement grout ✓	3 Bentoi				
	<b>O</b> ft. to	ft., From	ft. 1				ft. to
What is the nearest source of				10 Livest	• • •		ndoned water well
Septic tank		7 Pit privy		11 Fuel s	torage	15 Oil	well/Gas well
2 Sewer lines	5 Cess pool	8 Sewage lagoo	n	12 Fertilizer storage		16 Oth	er (specify below)
	3 Watertight sewer lines 6 Seepage pit 9 Feedyard			13 Insecticide storage			
Direction from well?	eat		<u> </u>	How man	y feet? 150		· · · · · · · · · · · · · · · · · · ·
FROM TO	LITHOLOGIC		FROM	то		ITHOLOGIC	LOG
0 30/TO	op soil of Cla	4				<u> </u>	
		<u> </u>					THE MANUFACTURE AND A STREET OF THE STREET O
3 1708 m	udium Sas	d					
						1	•
17 18/95	al Charce	ml.					
		A CONTRACTOR OF THE PROPERTY O					· · · · · · · · · · · · · · · · · · ·
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					on the state of th		· · · · · · · · · · · · · · · · · · ·
Z CONTRACTOR'S OR LA	NDOWNER'S CERTIFICA	TION: This water well was	(1)-construc	ted, (2) recoi	nstructed or (3) pl	ugged unde	my jurisdiction and was
completed on (mo/day/year)	.5-20: by	TION: This water well was					
7 CONTRACTOR'S OR LA completed on (mo/day/year) Water Well Contractor's Lice	5-20 BY		A STATE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN	and this recor	d is true to the bes	st of my knov	
completed on (mo/day/year) Water Well Contractor's Lice under the business name of	15-20: 54 nse No. 3.18	This Water Wel	Record wa	and this recor s completed c by (signat	d is true to the bes on (mo/day/yr)	st of my knov	rledge and belief. Kansas
completed on (mo/day/year) Water Well Contractor's Lice under the business name of INSTRUCTIONS: Use typew	nse No. 3.18 Whynys Criter or ball point gen, PLEA	This Water Wel		and this recores completed of by (signator, Please fill in	d is true to/the bes on (mo/day/yr) ure) blanks, underline	or circle the	vledge and belief. Kansas
completed on (mo/day/year) Water Well Contractor's Lice under the business name of	nse No. 3.1.8 Light Mary Control of the control of	This Water Wel		and this recores completed of by (signator, Please fill in	d is true to/the bes on (mo/day/yr) ure) blanks, underline	or circle the	vledge and belief. Kansas