			WATER	WELL RECORD	Form WWC-5	KSA 82a	a-1212	MUSI	8
LOCATI	4	TER WELL:	Fraction		ni A de	tion Number	Township I		Range Number
County:		SWICK		VE 45		2b	J T 25	j s	R 2 19w
Distance a	and direction	from nearest town of	Same and the same	- CORP	A 39				
na e		3 mices	S.E. 0	F FURLEY	Ks.				
WATER	R WELL OW	NED ALICE							,
RR#. St. /	Address. Bo	X # : 8808 ^	J. 127-II	EAST			Board of	Agriculture. Di	vision of Water Resources
City State	, ZIP Code	VALLEY	(CENTER.	Ks. 67147	ě			n Number:	
		OCATION WITH 4			721	4 ELEVA			A CONTRACTOR OF THE CONTRACTOR
AN 'X"	IN SECTIO			iter Encountered					
	· · · · · · · · · · · · · · · · · · ·								2/0/00
<b>†</b>	i	, vvi		ATER LEVEL (2)					
-	NW	NE	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~						ping gpm
	1								ping gpm
w -		βο F Bo	re Hole Diamete	r. 🕼 in. to	3.3.1		and	aparamental de la company	O
≨ "	1	i W	ELL WATER TO	BE USED AS:	5 Public wate	r supply	8 Air conditionin	g 11 lr	jection well
	<b>X</b>   W	SF	1 Domestic	3 Feedlot	6 Oil field wa	ter supply	9 Dewatering		ther (Specify below)
	1		2 Irrigation	4 Industrial	7 Lawn and g	arden only	10 Observation w	iel Mon	ITDRING (NELL
	i	Wa	as a chemical/ <del>ba</del>	<del>steriological</del> sample	submitted to De	epartment? Y	esNo	; If yes, r	no/day/yr sample was sub-
L		j mi	tted	Campanian and the second		Wa	ater Well Disinfect	ed? Yes	No V
5 TYPE C	OF BLANK	CASING USED:	5	Wrought iron	8 Concre	ete tile	CASING JO	DINTS: Glued	Clamped
1 Ste	eel	3 RMP (SR)	$\epsilon$	Asbestos-Cement	9 Other	(specify below	w)	Welded	i
2(P)	/C)	4 ABS		Fiberglass					ed
		<b> 2</b> <u></u> in.	10 22.1	ft., <del>Dia</del>			······································	observation or annual for	- <del> </del>
Casing he	ight above l	and surface $2$ .	OPT. +						5440
		R PERFORATION M		., v.o.g.,	(PV	Man.		bestos-cemen	
1 St		3 Stainless st		Fiberglass	The same of the sa	IP (SR)			
2 Br		4 Galvanized		Concrete tile	9 AB			one used (ope	
		RATION OPENINGS				3			
		-1000000000000000000000000000000000000	in the second se		zed wrapped		8 Saw cut		11 None (open hole)
	ontinuous slo	CONTRACTOR OF THE PARTY OF THE	Name of Street, or other Designation of the Owner, where the Park of the Owner, where the Owner, which is the Owner, whic		wrapped		9 Drilled holes		
	uvered shut		ounched From 22	7 Toro		شد			
SCHEEN-	PERFORAL	ED INTERVALS:		ft. to .			m		
			From 17		33.1	tiFro		<del>, , , , , , , 10 to</del>	minimizationis interioris interioris interioris [1]
(	GRAVEL PA	CK INTERVALS:			93.1.		M		
1			From			ft., Fro		ft. to	tt,
B GROUT	T MATERIAI			Cement grout	3 Bento	4 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	Other		
Grout Inte		m. <i>O. O</i> ft.							-ftto
What is th	ie nearest s	ource of possible cor	ntamination $\mathcal{O}_{\mathcal{R} \mathcal{U}}$	-OisposaTR	way 012	10 Lives	stock pens	14 Aba	andoned water well
1 Se	eptic tank	4 Lateral li	ines	7 Pit privy		11 Fuel	storage		well/Gas well
2 Sewer lines 5 Cess po		ol	8 Sewage la	goon		lizer storage		er (specify below)	
3 Watertight sewer lines 6 Seepage			e pit	9 Feedyard					TEMOUNTY.
Direction f	from well?	Mu	<b>I</b> ST			How ma	ıny feet?	PPROM.	25
FROM	то		LITHOLOGIC LO		FROM	ТО	****	LITHOLOGIC	CLOG
Ø. O	33.1	BROWN, H	ASTIC TOH	16HLY #LAST	K			·	
(FT)_	(FT)	CAUTOL	KATUSOS.	n O a u =					
	0.9	SHALS W	ITH TRA	ce To Son	JS.				
		CALCIUM	GREGNA:	TE NODUL	as				
	·		e e	<del></del>					
	1								
		<u> </u>			<u> </u>		<del> </del>	<del></del>	<del>-1</del>
<del></del>							* **	the state of the s	
1 1		* * * * * * * * * * * * * * * * * * * *					Integral of the conservation ( )		mineral transfer and the state of the state
							<del> </del>		· , · · , · · , · · · · · · · · · · · ·
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			<del>de agradiante de la constante de la constante</del>	· · · · · · · · · · · · · · · · · ·				<del></del>	
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	L.,	1	<del>manana sa sa</del>		<u> </u>	<u> </u>			
7 CONTI	RACTOR'S	OR LANDOWNER'S	CERTIFICATION	V: This water well	was (1) constru	cted (2) reco	onstructed, or (3)	plugged unde	r my jurisdiction and was
	on (mo/day		124/82						viedge and belief. Kansas
		's License No.	0.00	This Water					82_ II
		me of TERRACO				by (signa		Ja	CE. D.
INSTRUC	TIONS: Use	typewriter or ball poi	nt pen, PLEASE	PRESS FIRMLY a	nd <i>PRINT</i> clear			e or circle the	correct answers. Send top
	0.00					and the second second			
		Department of Healt ne for your records.				mental Geolo			end one to WATER WELL