		WATER WELL	RECORD F	orm WWC-	5 KSA 82a-	-1212	
1 LOCATION OF WATER	WELL:	Fraction			ction Number	Township Number	Range Number
County: Butler	:	NE 1/4 NU	1 14 SW	1/4	5	T 25 S	R 3 EAWX
Distance and direction from	m nearest town or	city street address of	well if located	within city?		11.4	
approx. 5 mi. north of Andover							
2 WATER WELL OWNER: Coastal Derby Pipeline							
RR#, St. Address, Box # : 202 West 1st Board of Agriculture, Division of Water Resources							
City, State, ZIP Code	: Wichita					Application Number:	
1			ED WELL		ft FLEVA	TION:	
DEPTH OF COMPLETED WELL. 1							
WELL'S STATIC WATER LEVEL . 999 ft. below land surface measured on mo/day/yr							
						fter hours pu	- 1
NW	- NE	•					
	I Est.	Tield gpm	T veil water	was	7 `	fter hours pu andir	amping
N NI							.1
ž " X		L WATER TO BE US		Public water		8 Air conditioning 11 9 Dewatering 12	Injection well
sw	- SE <i>(</i>						
	' ' ' '					10 Monitoring well	
			gical sample su	bmitted to D			, mo/day/yr sample was sub-
- - -	mitte					ter Well Disinfected? Yes	No .
5 TYPE OF BLANK CAS			ght iron		ete tile		d Clamped
1 Steel	3 RMP (SR)		stos-Cement		(specify below	-,	ded
2 PVC	4 ABS	7 Fiber	glass				aded
						ft., Dia	
Casing height above land	surface	🕇 in., weig	ht			ft. Wall thickness or gauge N	lo
TYPE OF SCREEN OR P	PERFORATION MA	TERIAL:		_	YC >	10 Asbestos-cem	ent
1 Steel	3 Stainless stee	el 5 Fiber	glass	8 R	MP (SR)	11 Other (specify)
2 Brass	4 Galvanized st	teel 6 Conc	rete tile	9 AE	3S	12 None used (or	pen hole)
SCREEN OR PERFORAT	TION OPENINGS A	ARE:	5 Gauzed	wrapped		8 Saw cut	11 None (open hole)
1 Continuous slot	Mill slo		6 Wire w	apped		9 Drilled holes	
2 Louvered shutter	4 Key pu		7 Torch o		_		
SCREEN-PERFORATED	INTERVALS: F	ا	ft. to		ft., Fror	n ft.	toft.
	F	rom	ft. to		ft., Fror	m ft.	toft.
GRAVEL PACK INTERVALS: From							
		From	ft. to	_	ft., Fror		to ft.
6 GROUT MATERIAL:	1 Neat ceme	nt <u>2 Cemer</u>	nt grout	3 Bent	onite 4	Other	
Grout Intervals: From	😂 ft. to		From			ft., From	ft. to
What is the nearest source							Abandoned water well
1 Septic tank	4 Lateral lin	es 7	Pit privy		11 Fuel s	storage 15 0	Dil well/Gas well
2 Sewer lines	5 Cess pool		Sewage lagoo	n		-	Other (specify below)
3 Watertight sewer I			Feedyard				SELEAK
Direction from well?					How mai	1/-	· •
FROM TO	L	THOLOGIC LOG		FROM	TO	PLUGGING	INTERVALS
0 25	SILTUC	CPAI/ W	K				
	~ . = + 4 °	- · · · · ·	1				
	Son	ME SHAL	£				
		Phil					
DK TO .	SHALE	14.3		-		10.21	
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	1 111	ESTONE S	STOCAVO				,
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				-	+		
					+		
							:
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was							
completed on (mo/day/yea				<u></u>	and this reco	rd is true to the best of my ki	powledge and belief. Kansas
Water Well Contractor's Li			This Water We	II Record w	as completed	on (mo/day/yr) 2/3./	72
under the business name	of Layne	Western Co.	V	lichita	a by (signat	ture)	2
INSTRUCTIONS: Use typew	riter or ball point pen. F	PLEASE PRESS FIRMLY and	PRINT clearly. Pleas	se fill in blanks,	underline or circle	the correct answers. Send top three	e copies to Kansas Department
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT 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 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.							