Form WWC-5P

1 LOCATIO	OF WATER	WELL:	Fraction X SE 1/4	Section Number	Township Number	Range Number
Distance and discortion from nearest tounder city street address of well if located within city?						
RR#, St.	WELL OWNER: Address, Bo te, ZIP Coo	× #: 6015	Herodua N. Bradua	Board of Agri Application N	culture, Division of umber:	Water Resources
3 MARK W	ELL'S LOCATION	TION WITH	4 DEPTH OF WELL WELL'S STATIC WAT		ft.	
N N	W	N EE	WELL WAS USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial	5 Public Water Sup 6 Oil Field Water 7 Lawn and Garden 8 Air Conditioning	Supply 10 Monitorin Only 11 Injection	g Well Well
s	W S		If yes, mo/day/yr s	eriological sample s ample was submitted. ted: YesNo		t? YesNo
5 TYPE O	F BLANK CAS	SING USED:				
Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile Blank casing diameterin. Was casing pulled? Yes No If yes, how muchin. Casing height above or below land surfacein.						
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Coment grout 3 Bentonite 4 Other						
Grout Plug Intervals: Fromft. toft., Fromft. toft., From toft.						
1 Se 2 Se 3 Wa 4 La	ptic tank wer lines tertight se teral lines ss Pool	ewer lines	ge age well l	History.		
Direct	ion from we	ell?		How many feet?	•••••	
FROM	το	PLU	JGGING MATERIALS			
53	9	Cyro	wey			
9	3	cen	nent			
3	0	tops	al			
├ on (mo	/day/year) Well Contr	15191	EBBIFICATION: This water and this reconsist in the business name to the	rd is true to the be This Water Well	nder my jurisdiction st of my knowledge an Record Was completed	d belief. Kansas
1			/			t the section is

INSTRUCTIONS: Use typewriter or ball point perf. 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: 785/296-3565. Send one to Water Well Owner and retain one for your records.