WATE	R WELL	RECORD NW NE N	W NW Form WW	<u>C-5</u>	Division	of Water	r Resources; App. No.		
1 LOC	ATION O	WATER WELL:	Fraction WW/4	Mist.	Section Nu	ımber	Township Number	Range Number R E/W	
Dista	County: Distance and direction from nearest town or city street address of well if				Global Positioning Systems (decimal degrees, min. of 4 digits)				
locate	located within city? 2213 Droff wood				Latitude:				
100			WOOD						
2 WA	TER WEL	LOWNER: ROEI	-226		Elevation				
RR#	. St. Addre	LOWNER: REF	N. Mersdia	m	Datum:				
City	, State, ZIP	Code : [1-1-4	KS 6720	4	Data Colle	action N	Mathad:		
		VIVIL	MDI ETED WELL	3			vienioa.		
-	ATE WEI	{	MPLETED WELL.						
	'ATION 'H AN "X"	IN Donath (a) Crossed vis	stan Engayatanad (1	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	A (2)	A (2)	Δ	
		Depin(s) Groundwa	WATED LEVEL	5	halaviland	∠) 			
SEC	WITH AN "X" IN SECTION BOX: N Pump test data: Well water was ft. after hours pumping.								
Est. Yield 20 gpm: Well water was								gpm	
!		WELL WATER TO	D BE USED AS: 5 P						
	V NE -	-1 1	Feedlot 6 Oil fi	eld water su	suppiy innly	0 Dew	stering 17 f	other (Specify below)	
W 💌	W NW NE E 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below 2 Irrigation 4 Industrial 2 Domestic (lawn & garden) 10 Monitoring well								
SV	Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs								
		Sample was submit	ted	Wate	er well disin	fected?	Yes 🗶 No	11 yes, 1110/day/ y15	
Sample was submitted									
			1.1			CACDI	O LODITO CL 1	>	
5 TYPI	E OF CAS	ING USED: 5 Wroug	ght Iron 8 Co	oncrete tile	. 1 1	CASING	JOINIS: Glued	. Clamped	
	Steel	,			•				
D. 62	VC	4 ABS 7 Fiberg	lass		· · · · · · · · · · · · · · · · · · ·	······	I hread	ed	
Blank casing diameter									
Casing height above land surface									
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass CVC 9 ABS 11 Other (Specify)									
	Steel		oncrete tile 8 RM (
	Brass			SK) 10.	Asuesius-Ci	Silicit	12 None used (ope	ii noie)	
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)									
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)									
2 Louvered shutter 4 Key punched 6 Wire wrapped Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From									
SCREEN-PERFORATED INTERVALS: FIGHT. 11. 10									
From									
From									
					•				
6 GRO	UT MATE	RIAL: 1 Neat cement	2 Cement grout	Bentonite	4 Other				
Grout In		From ft. to			ft. to	ft	., From	ft. toft.	
What is	the nearest	source of possible contami	ination:						
								16 Other (specify	
Bewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel s						storage 14 Abandoned water well below)			
3	Watertight	sewer lines 6 Seepage pi	it 9 Feedyard	12 Fertili:	zer Storage	15 Oi	l well/gas well		
Directio	n from wel	1? North		How man	y feet?	40			
FROM	TO	LITHOLOG	GIC LOG	FROM	OT		PLUGGING IN	TERVALS	
0	3	Tonsost							
3	10	Fresal	7						
in	30	Corave	-					-	
10	70	G/A-/							
<u> </u>									
			· · · · · · · · · · · · · · · · · · ·				<u> </u>		
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	 				+				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged									
under my jurisdiction and was completed on (mo/day/year)									
under m	y jurisaicu	on and was completed on (). Contractor is License No.	This Wa	ter Well Ra	cord was co	mnleted	on (mo/day/year)	8-28-07	
Kansas	water well	name of	11/1/2	Z-h	v (sionatur	e) / -	Malenn	•	
INSTRUC	CTIONS: Us	e typewriter or ball point pen. P	<i>LEASE PRESS FIRMLY</i> ar	nd <i>PRINT</i> clear	rly. Please fill	in blank	underline or circle the	correct answers. Send top	
three copi	es to Kansas l	Department of Health and Environ	nment, Bureau of Water, G	eology Section	, 1000 SW Jac	kson St., S	Suite 420, Topeka, Kans	as 66612-1367. Telephone	
785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at									
http://www.kdheks.gov/waterwell/index.html.									