Ĭ	09D								
WATEŔ	R WELL	RECORD		Form WW	orm WWC-5 Division of Water Resources; App. No.				
1 LOCATION OF WATER WELL:			Fraction		Section Number Township Number			Range Number	
1		wick		SE 45W 141	(11) 1/4	35		T Z6 S	R (E)W
Distar	nce and dir	ection from neare	st town or ci	y street address of	well if			Systems (decimal deg	
locate	d within c	tv?		,		Latitude:	_		
Si) L	tha compl	» V						
2 WAT	ER WEL	L OWNER:		itset Indu	19:24	Elevation			
RR#,	St. Addre	ss, Box # :	OCK - GI	いたられる	ا کا از د الم	Datum:	1		·
RR#, St. Address, Box # : 4/11 E, 3) \$\frac{15}{2}\$ St. North									
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELLZ.S						Data Collection Method.			
LOCATION LOCATE WELL'S 4 DEPTH OF COMPLETED WELL									
WITH AN "X" IN Depth(s) Groundwater Encountered (1)									
	SECTION BOX: WELL'S STATIC WATER LEVEL3. Let (2)								
SECI	N Pump test data: Well water wasft. afterhours pumpinggpm								
	Est. Yield gpm: Well water was ft. after hours pumping gpm: gpm: Well water was gpm: gpm: gpm: gpm: gpm: gpm: gpm: gpm:								
WELL WATER TO BE LICED AC. 5 Public victor gumly 9 Air conditioning 11 Injection well									
	1 Demostic 2 Feedlet 6 Oil field water supply 0 Devetoring 12 Other (Specify below								
W X	W 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well								
'	'		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	astriar / Dome	stic (iawii t	z garacii) (To Milos	intoring wen	***************************************
SW	SW SE Was a chemical/bacteriological sample submitted to Department? Yes No★; If yes, mo/day/yrs								
Sample was submitted									
S									
# TVDE		NC USED.	5 Wrought 1	man 9 Ca	ncrete tile		CASIN	G JOINTS: Glued	Clampad
l	UF CAS	ING USED:	5 Wrought	ron 8 Co Cement 9 Otl		· halam)	CASIN	Waldad	Clamped
				Cement 9 Ou	ier (specify	below)		Weitett	
PVC 4 ABS 7 Fiberglass Threaded									
Blank casing diameter in. to Z.O ft., Diameter in. to ft., Diameter ft., Diameter in. to ft., Diameter in. to ft. Wall thickness or guage No. S.L									
				DIAI ·		105./11.	wan un	exiless of guage 110.	~3K k
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass PVC 9 ABS 11 Other (Specify)									
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)									
					510 ,	15005105	,01110111	12 I tone used (open	1 11010)
SCREEN OR PERFORATION OPENINGS ARE: 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 8 Saw cut 10 Other (specify)									
SCREEN	I-PERFOR	ATED INTERVA	ALS: From) 7.5	ft., :	From	ft. to	ft.
SCREEN-PERFORATED INTERVALS: From									
GRAVEL PACK INTERVALS: From 18 ft. to 20 ft., From ft. to ft.									
From ft. to ft., From ft. to ft.									
6 GROU	JT MATE	RIAL: 1 Neat	cement 2	Cement grout 3	Bentonite	4 Other			
Grout Int						ft. to	f	ft., From	ft. toft.
		source of possible							
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide storage 16 Other (specify									
	Sewer lines			8 Sewage lagoon	11 Fuel st			bandoned water well	below)
		sewer lines 6 Se				zer storage			
		<u> 1?</u>				-		DI LICONIO DE	
FROM	TO	~ * * * * * * * * * * * * * * * * * * *	THOLOGIC	LUG	FROM	OT I		PLUGGING INT	EKVALS
0	4'	Clay, moi							
8	-8	Sundy Clay	y, moist						
8	12	Clayey Sand	, wet						
12	24	Sand, wes	上						
24	25	cluy, dry							
		/							
								····	
						1 <u>.</u>	\mathcal{N}		
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/year)									
under my	/ jurisdicti	on and was compl	eted on (mo/	day/year)	7.08 and	this record	s true	to the best of my know	wledge and belief.
Kansas V	Vater Well	Contractor's Lice	ense No 4	D.7 This Wat	er Well Re	cord was co	ompleted	d on (mo/day/year)	1.7.2.7.
under the	business	name of Courties	n beautal to	ribrists octivice	.Trc b	y (signatur	re)		
INSTRUC	TIONS: Us	e typewriter or ball po	oint pen. <i>PLEA</i>	<u>SE PRESS FIRMLY</u> an	d <i>PRINT</i> clear	rly. Please fil	ll in blank	s, underline or circle the c	orrect answers. Send top
three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 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.									