		ER WELL RECORD	Form WWC-5				
LOCATION OF WATER ounty:	WELL: Fraction	NE VA NE	W. 1/4 Sec	ction Number	Township Num	nber S	Range Number R
	nearest town or city street	address of well if located	d within city?				
WATER WELL OWNER		eyer,					
#, St. Address, Box #		53Rd 1	beth		Board of Ag	riculture, D	ivision of Water Resource
y, State, ZIP Code	Wi	Chita K		204	Application 1		
	TION WITH 4 DEPTH OF		42	ft. ELEVA	TION:		
N	Depth(s) Groun	ndwater Encountered 1.	6	π. 2 volous land our	face measured on m	π. 3.	1-7-5-88
	WELL'S STATE	nn test data: Well wate	ar was	pelow land sur	face measured on n	hours our	nping Z. O gpm
NW	NE Fst Yield 7	S onm: Well water	rwas	ff a	fter	hours pur	nping gpm
	Bore Hole Diar	neter // in to	. was	12 "	and	in in	toft.
W		· /	5 Public water		8 Air conditioning		njection well
1 1	1 Domesti	1			9 Dewatering		Other (Specify below)
3	2 Irrigation				0 Observation well		
i	Was a chemica	l/bacteriological sample s	submitted to D	epartment? Ye	sNo?	S.; If yes,	mo/day/yr sample was sub
\$	mitted			Wa	ter Well Disinfected?	Yes	No
TYPE OF BLANK CASI		5 Wrought iron	8 Concr				Clamped
	3 RMP (SR)	6 Asbestos-Cement	9 Other	(specify below	v)		d
2 PVC	4 ABS in. to3	7 Fiberglass		• • • • • • • • • • •	4 5	Threa	ded
	surface						
	ERFORATION MATERIAL:	III., Wolgilt	7 PV			gauge No stos-cemer	
1 Steel	3 Stainless steel	5 Fiberglass		P (SR)		(specify) .	
2 Brass	4 Galvanized steel	6 Concrete tile	9 AB			used (ope	
REEN OR PERFORATION	ON OPENINGS ARE:	5 Gauze	ed wrapped		8 Saw cut		11 None (open hole)
1 Continuous slot	3 Mill slot	6 Wire	wrapped		9 Drilled holes		
2 Louvered shutter	4 Key punched	7 Torch		-	10 Other (specify)		
REEN-PERFORATED IN	NTERVALS: From	ft. to		ft., Fror	n	ft. to	
	From		,	ft., Fror	n <i></i>	ft. to	
GRAVEL PACK II		/. <i>[</i> 0 ft. to	7				
GROUT MATERIAL:	From 1 Neat cement	2 Cement grout	O Donto	ft., Fron		ft. to	ft.
out Intervals: From	7 // \		3 Bento				. ft. to
	of possible contamination:				ock pens		andoned water well
1 Septic tank	4 Lateral lines	7 Pit privy			storage		well/Gas well
2 Sewer lines	5 Cess pool	8 Sewage lago	on		zer storage		ner (specify below)
3 Watertight sewer lin	es 6 Seepage pit	9 Feedyard		13 Insect	icide storage .		
rection from well?	south.			How mar	ny feet? //O	,	
ROM TO	LITHOLOGIC	C LØG	FROM	то	LI	THOLOGI	CLOG
	In Co	/					
2 1	011 000						
					•		
, 14 /	yay -				11	*-	
- 11/							
1 42	MAD						
7							
			-				
				5			
	ANDOWNER'S CERTIFICAT	FION: This water well w	s (1) constru	cted (2) reco	nstructed or (3) plu	gged unde	r my jurisdiction and was
mpleted on (mo/day/year)		_			, ,	of my know	wledge and belief. Kansas
ter Well Contractor's Lic	1.10		ell Hecord wa	•	on (no/day/yr)	1	o
der the business name o	iter or ball point pen. PLEASE PRE	ESS FIRMLY and PRINT clear	rly. Please fill in I	by (signat		wers. Send	top three copies to Kansas
Department of Health and En	vironment, Bureau of Water Prote	ction, Topeka, Kansas 66620	320, Telephor	ne: 913-862-9360	end one to WATER	WELL OWN	ER and retain one for your
ecords.							