					PLUGGIN	10 leson	
1 2001 132211 01 11111211 312221	Fraction Fraction	Form WWC-	5 KSA 82 ction Numbe	er Township Nu	mber // R	ange Number	
County: See 9 Wick	UW WHE WN	L 1/4	/ පි_	T 26	SR		
Distance and direction from nearest town or	city street address of well if locate	ed within city?	•				
WATER WELL OWNER ALL	everkux						
RR#, St. Address, Box # : 7340 M	LL STREET LO			Board of A	griculture, Division	of Water Resource	
City, State, ZIP Code : (A) I C	Kr 67220			Application	Number:		
	DEPTH OF COMPLETED WELL						
AN "X" IN SECTION BOX: Dep	oth(s) Groundwater Encountered	<u>1, </u>	ft	. 2	ft. 3		
VE WE	LL'S STATIC WATER LEVEL						
NW NE	Pump test data: Well wat						
	Yield gpm: Well wat						
	e Hole Diameterin. to LL WATER TO BE USED AS:	5 Public wat					
-	1 Domestic 3 Feedlot			8 Air conditioning 9 Dewatering	• -	n well Specify below)	
SW SE		_		10 Monitoring well			
	s a chemical/bacteriological sample	_		-			
S mitte				Vater Well Disinfected		No	
TYPE OF BLANK CASING USED:	5 Wrought iron	8 Conci	rete tile	CASING JOI	NTS: Glued	. Clamped	
(1)Steel 3 RMP (SR)	6 Asbestos-Cement		(specify bel	•			
2 PVC ABS	3 C ^{7 Fiberglass}						
Blank casing diameter in. 1							
Casing height above land surface TYPE_OF SCREEN OR PERFORATION MA					r gauge No estos-cement		
1 Steel 3 Stainless stee			MP (SR)	_			
2 Brass 4 Galvanized s	_ -	9 ABS			11 Other (specify)		
SCREEN OR PERFORATION OPENINGS		uzed wrapped		8 Saw cut	• •	ne (open hole)	
1 Continuous slot 3 Mill slo	ot 6 Wire	wrapped		9 Drilled holes			
2 Louvered shutter 4 Key pt	unched 7 Torci						
GROUT MATERIAL: 1 Neat ceme Grout Intervals: Fromft. to	/()			4 Other			
nat is the nearest source of possible contamination:			10 Livestock pens		14 Abandoned water well		
1 Septic tank 4 Lateral lin	F,	• •		11 Fuel storage		15 Oil well/Gas well	
2 Sewer lines 5 Cess pool		8 Sewage lagoon		12 Fertilizer storage		16 Other (specify below)	
3 Watertight sewer lines 6 Seepage Direction from well?	pit 9 Feedyard			ecticide storage any feet?			
	ITHOLOGIC LOG	FROM	TO	PL	JGGING INTERVA		
		35	10	Chloefux	100 SAN 1	0	
		10	0	CAMPA	GROUT		
				O Con C 17	Secus		
					•		
		_					
			ļ				
			 				
			1				
CONTRACTOR'S OR LANDOWNER'S Completed on (mo/day/year)	CERTIFICATION: This water well w	vas (1) constru	icted, (2) red	constructed, or	ugged under my ji	urisdiction and was	
ompleted on (mo/day/year) 5	472				t of my knowledge	and belief. Kansas	
Vater Well Contractor's License No 4.9	5. This Water ∨	Veil Record wa	•	1-10	アダイカ	·····	
inder the business name of RAA			by (sign	natur	white	-	
INSTRUCTIONS: Use typewriter or ball point pen. P	PLEASE PRESS FIRMLY and PRINT clearly. Pl ka, Kansas 66620-0001. Telephone: 913-296-					Kansas Department	