	_	WATER WEL	L RECORD	Form WWC-5	KSA 82a-	1212	
1 LOCATION OF WA		Fraction			tion Number	Township Number	Range Number
County: Sedg	wick	SE 1/4 NE	1⁄4 SE	1⁄4	31	<u>т 26 s</u>	R 2 EXX
Distance and direction	n from nearest town or	city street address	of well if locate	d within city?			
2 WATER WELL OV	WNER: Amoco	Service S	Station	No. 2316	5	MW 16	
 RR#, St. Address, Bo		St. & Rock				Board of Agriculture	Division of Water Resources
City, State, ZIP Code		ta, Ks.				Application Number:	
	LOCATION WITH 4 DI					ΓΙΟΝ:	
	N Depti						3
							oumping
	Est.	7	5	-			pumping gpm
				• -			n. to
₹ ^{′′}		L WATER TO BE		5 Public wate		8 Air conditioning 1	
sw				6 Oil field wat			2 Other (Specify below)
1		0				0 Monitoring Well	
<u> </u>			ological sample	submitted to De			s, mo/day/yr sample was sub-
5 TYPE OF BLANK				8 Concre		er Well Disinfected? Yes	No ed Clamped
5 TYPE OF BLANK 1 Steel	3 RMP (SR)		ought iron				
2 PVC	4 ABS		pestos-Cement erglass		specify below	/	eaded
	_		0				. in. to
-							No
-	OR PERFORATION MA		-ign:	FTPV	and the second se	10 Asbestos-cen	
1 Steel	3 Stainless steel		erglass		P (SR)		/)
2 Brass	4 Galvanized ste		ncrete tile	9 AB		12 None used (c	
	RATION OPENINGS A			ed wrapped		8 Saw cut	11 None (open hole)
1 Continuous sl				wrapped		9 Drilled holes	
2 Louvered shu		-	7 Torch	••			
SCREEN-PERFORAT	, ,	rom	ft to		ft From	n ft.	toft.
							toft.
GRAVEL P	ACK INTERVALS: F	rom	ft. to	19	ft From	n	toft.
		rom	ft. to	Ç	ft., Fron		to ft.
6 GROUT MATERIA	L: Neat cemer	2 Cem	ent grout	3 Bento			
Grout Intervals: Fro			-	ft.	to	ft., From	ft. to
What is the nearest s	source of possible conta	mination:			10 Livest	ock pens 14	Abandoned water well
1 Septic tank	4 Lateral line	S	7 Pit privy		11 Fuels	storage 15	Oil well/Gas well
2 Sewer lines 5 Cess pool			8 Sewage lagoon		12 Fertilizer storage 16 Other (specify below)		Other (specify below)
3 Watertight sev	wer lines 6 Seepage p	it	9 Feedyard		13 Insect	icide storage 🕻 🙏	ST
Direction from well?					How man		
FROM TO		THOLOGIC LOG		FROM	то	PLUGGING	INTERVALS
0 20	Silty	Clau	•				
	<u> </u>		[
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<u> </u>	<u>L</u>				l		
7 CONTRACTOR'S	OR LANDOWNER'S CI	ERTIFICATION: TH					nder my jurisdiction and was
completed on (mo/day	y/year)	. <u>19</u> 0					nowledge and belief. Kansas
Water Well Contracto	r's License No.	1.02				on (mo/day/yr) . 3./1.8	<i>.[</i> . <i>9.1</i>
	ame of Layne We:						B.Meier
INSTRUCTIONS: Use of Health and Environ	typewriter or ball point pen. <u>PL</u> ment, Bureau of Water, Topeki	<u>EASE PRESS FIRMLY</u> a a, Kansas 66620-7320. T	and <u>PRINT</u> clearly. P elephone: 913-296-5	lease fill in blanks, i545. Send one to '	underline or circle WATER WELL OV	the correct answers. Send top three VNER and retain one for your record	e copies to Kansas Department