WATER WELL RE	CORD MW-8	Form WW0	C -5	Division of V	Water Resources; App. No.	,	
1 LOCATION OF W. County: Sedau	ATER WELL:	Fraction NE 1/4	NE 1/4	Section Numb	T Winship Number	r Range Number R 1 PW	
Distance and direction	n from nearest town	or city street address of			oning Systems (decimal of	degrees min of 4 digits)	
located within city?		•		Latitude: 2	7 1,9797	regrees, min. or + digital	
Tooling William City	455 N. BR	oduay (on-si	を) 「i	ongitude:	7. 69297 17. 33592		
2 WATER WELL O				Elevation: $oldsymbol{I}$	300.75 (TOC)		
RR#, St. Address, B	ox # : 455 N. F	roadway		Datum: 12	DI. 16 (Gound)	/	
City, State, ZIP Cod	1001140	a.KS 67202	1	Datum. 15	ion Method: Lacal	Cucia	
3 LOCATE WELL'S	אוז ווכש	MPLETED WELL	20.10	Jaia Collecti	ion Method: Legal	xu vey	
LOCATION						•	
WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered (1). 16.38 ft. (2) ft. (3) ft. (3) ft. (5) ft. (1) ft. (2) ft. (3) ft. (4) ft. (5) ft. (5) ft. (6) ft. (7) ft. (8) ft. (1) ft. (1) ft. (1) ft. (2) ft. (3) ft. (1) ft. (2) ft. (3) ft. (4) ft. (5) ft. (6) ft. (1) ft. (1) ft. (2) ft. (3) ft. (4) ft. (5) ft. (6) ft. (1) ft. (1) ft. (1) ft. (2) ft. (3) ft. (4) ft. (5) ft. (6) ft. (6) ft. (6) ft. (6) ft. (7) ft. (8) ft. (1) ft.							
	SECTION BOX: WELL'S STATIC WATER LEVEL 16. 38 ft. below land surface measured on mo/day/yr 10. 5.05.						
N N	N Pump test data: Well water wasft. after hours pumping gpm						
Est Violation with the Company of th							
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well							
W - NW - NE - E 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)							
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) (10 Monitoring well							
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs							
Sample was submitted							
S					,		
5 TYPE OF CASING	USED: 5 Wron	ight Iron 8 Co	ncrete tile	CAS	SING JOINTS: Glued	Clamped	
1	MP (SR) 6 Asbe						
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded							
Blank casing diameter 2 in. to							
Casing height above land surface							
TYPE OF SCREEN OR	PERFORATION M						
1 Steel 3 St	ainless Steel 5			3S		·)	
	alvanized Steal 6		SR) 10 A	sbestos-Ceme	ent 12 None used (ope	en hole)	
SCREEN OR PERFORATION OPENINGS ARE:							
1 Continuous slot							
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)							
SCREEN-PERFORATED INTERVALS: From							
From							
GRAVEL PACK INTERVALS: From							
From							
6 GROUT MATERIA	L: 1 Neat cement	2 Cement grout 3	Bentonite 4	4 Other			
Grout Intervals: Fi	rom 8 ft. to	ft., From .	f	t. to	ft., From	ft. toft.	
What is the nearest sour					·····,		
1 Septic tank	-	nes 7 Pit privy	10 Livesto	ck pens 1	3 Insecticide Storage	16 Other (specify	
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well 6 below)							
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Qil wll/gas well							
Direction from well?	West		How many	feet? Qn	Site (50')	UST	
FROM TO	LITHOLO	OGIC LOG	FROM	TO	PLUGGING IN	TERVALS	
0' 1' A	<pre><drul+ conce<="" pre=""></drul+></pre>	011.					
1' 6.5' 40	W						
6.51 10' Sil	7						
10' 20' Sa	nd						
		14114 - 11114 - 11114					
7 CONTRACTOR'S (OR LANDOWNER	'S CERTIFICATION:	This water	well was	constructed, (2) reconst	ructed, or (3) plugged	
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 my jurisdiction and was completed on (mo/day/year)							
Under the business nam		ntemocrac		(signature)	Marie II		
		LEASE PRESS FIRMLY and P.	•	` '	s junderline or circle the cor	ect answers. Send ton 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.							