WATER WELL RECORD NW NESW NW Form WWC-5	Division of Water Resources; App. No.
1 LOCATION OF VATER WELL:  County: COUNTY: Fraction Fraction 1/4 WE 1/4	Section Number Township Number Range Number T S R EW
Distance and direction from nearest town or city street address of well if	Global Positioning Systems (decimal degrees, min. of 4 digits)
located within city?	Latitude:
a war and a sall had the sall	Longitude:
2 WATER WELL OWNER: Barry Thompson RR#, St. Address, Box # :2217W, 274NN City. State. ZIP Code :42217W	Elevation:
City, State, ZIP Code	Datum:
WI MILL RS Q 1207 III	Data Collection Method:
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL	
WITH AN "X" IN Depth(s) Groundwater Encountered (1)	
SECTION BOX: WELL'S STATIC WATER LEVEL. 20	below land surface measured on mo/day/yr
N Pump test data: Well water was	ft. after hours pumping gpm
	ft. after pumping gpm
NW NE    1 Daniel   2 E41-4   6 Oil 5-14	supply 8 Air conditioning 11 Injection well upply 9 Dewatering 12 Other (Specify below)
W E 1 Domestic 3 Feedlot 6 Oil field water st	& garden) 10 Monitoring well
Was a chemical/bacteriological sample submitted to	Department? Yes No; If yes, mo/day/yrs
Sample was submitted	
S	
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile	CASING JOINTS: Glued Clamped
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specific	y below) Welded
Plank assing diameter in to 7 Fibraliss	in to ft Diameter in to "ft
Blank casing diameter	
TYPE OF SCREEN OR PERFORATION MATERIAL:	
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)	
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot	
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)	
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)  SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.	
GRAVEL PACK INTERVALS: From	
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Prom	
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite	4 Other
Grout Intervals: From ft. to ft. to	. ft. to ft., From ft. toft.
What is the nearest source of possible contamination:  1 Septic tank  4 Lateral lines 7 Pit privy  10 Lives	tock pens 13 Insecticide Storage 16 Other (specify
1 Septic tank 4 Lateral lines 7 Pit privy 10 Lives 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel s	
	izer Storage 15 Qil well/gas well
Direction from well?	
FROM TO LITHOLOGIC LOG FROM	M TO PLUGGING INTERVALS
0 1 120 501	
Jay Sand	
12 40 Medium Sand	
10 40 Medimin Suria	
T CONTRACTORS OF LANDOWNED'S CERTIFICATION. This work	or well was Occupations (2) reconstructed or (3) plugged
under my jurisdiction and was completed on (mo/dat/wear) and this record is true to the best of my knowledge and belief.	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION. This water well was Doconstructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year)	
under the business name of VVIIIIVV VIIIVV VIIIVA, IIY 10V (Signature) K-713CV VVCIVIVIV	
INSTRUCTIONS: Use typewriter or ball point pen. <u>REASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correctanswers. 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	
three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Raisas 00012-1307. 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.	

KSA 82a-1212