WATER WELL REC	CORD	Form WW	C-5	Division of Wate	r Resources; App. No.		
1 LOCATION OF WA		Fraction		Section Number	Township Number	Range Number	
County: Sedal	MCK"	NE 1/4 NE 1/4		7	T (S)27	$R = \frac{R}{R}$	
Distance and direction located within city?	from nearest town or	city street address of	well if		Systems (decimal degr	rees, min. of 4 digits)	
located within city:				Latitude:	7-346-9-4		
2 WATER WELL OWNER: Mank Swellentrop				Longitude:Elevation:			
RR#, St. Address, Box	x# : 20U7	12 ts 15 'M	+ X	Datum:			
City, State, ZIP Code	in school	Fa Ic	1 10.	Data Collection 1	Method:		
3 LOCATE WELL'S	ft.	Tellou.					
LOCATION							
WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered (1)							
SECTION BOX: WELL'S STATIC WATER LEVEL					w land surface measured on mo/day/yr  after hours pumping gpm		
	Fumptest u	pm: Well water was.	• • • • • • • • • • • • • • • • • • • •	ft after	hours pumping	gpm	
NW NE	WELL WATER TO	BE USED AS: 5 Pu	ıblic water	supply 8 Air	conditioning 11 Inje	ection well	
W							
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well							
SW  SE  W  SE							
Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs Sample was submitted							
Sample was submitted							
5 TYPE OF CASING U	SED: 5 Wrough	ht Iron 8 Co	narata tila	CASINI	G JOINTS: Glued X	Claman	
1 Steel 3 RMI				y below)		Clamped	
CPVC 4 ABS	7 Fibergl	ass			Threaded		
Blank casing diameter							
Blank casing diameter							
TYPE OF SCREEN OR I				A D.C.	11.04- (0:0)		
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)							
SCREEN OR PERFORATION OPENINGS ARE:							
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)							
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw cut 10 Other (specify)							
SCREEN-PERFORATED INTERVALS: From							
From							
From ft. to ft., From ft. to ft.							
6 GROUT MATERIAL		2 Cement grou 3 F					
Grout Intervals: From What is the nearest source			• • • • • • • • • • • • • • • • • • • •	. 1 <b>ι. ιο</b> Ιι	, From	II. toII.	
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide storage 16 Other (specify							
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below)							
	lines 6 Seepage pit	9 Feedyard		zer storage15 Oil			
Direction from well?	North			ny feet? <b>50</b>			
FROM TO	LITHOLOG	IC LOG	FROM	TO TO	PLUGGING INTE	ERVALS	
\$ 93 L	A HOST	1.4					
73 40 C	sanay ya	nd-gravel	-				
15 10 0	<u> </u>	ice graves					
					ginal Returned t	e Sender	
				Gn	Correction Date	n: 11-15-10	
				for	Collection	1/20/11	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed, or (3) plugged							
under my jurisdiction and was completed on (mo/day/year)							
Kansas Water Well Contractor License No. [2.1.1 This Water Well Record was completed on (mo/day/year) 1.22.1.1							
under the business name of by (signature)  INSTRUCTIONS: Use typewriter or ball point pen. <u>PLASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, under the becorrect answers. Send top							
three copies to Kansas Department	riter of ball point pen. <u>M</u> ent of Health and Environ	TEASE PRESS FIRMLY and ment. Bureau of Water Ger	i <u>PRINT</u> clea	rly. Please fill in blanks	underline of their the co	rrect answers. 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 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.							