WATE	R WELL	L RE	CORD	NW NW SI	E IN Fa	orm WWC	<b>`_5</b>	Divisio	n of Water	r Resources; App. No.	
				ELL:						Township Number	
Cour	ntv:	Har	Vail	rick	MAS	14 SING 1/4 A	1/4		, unitioe		R 2 (E/W
Dista	ince and di	rection	from nea	arest town or	city street	address of v	vell if G			Systems (decimal deg	
	ed within o			_	-			Latitude:	_		
	121	1/2		Bud	120	no S	<i>T</i>	Longitud	ام.		
2 WA	TER WEI	LL OV	VNER:	1	Ma	· · · · ·	,	Elevation	n.		
RR#	St. Addre	ess. Bo	x# :	Vuc	1196	ego o		Dotum:		<u> </u>	* 4 <u> </u>
City	, State, ZII	P Ćode	: ',	3216	EXIL	ida Ce	wesp	Datum. Data Cal	lastian N	Method:	
2 100	A TER AND	TTIC	A DED	Jick	LTa	ugu eds Ce D WELL	-	Data Coi	rection r	viemod:	
3 LUC	CATE WE	LLS	4 DEP	In or co	WIPLE I E.	D WELL		• • • • • • • • • • • • • • • • • • • •	II.		
LOC	ATION 'H AN "X'										ft
			Depui(s	S) GIUUIIUWA	NATEDI	EVEL .	34 ft 1	II. halaw lan	d curfoce	ft. (3).	1/vr 12-5-08
SECTION BOX: WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr Pump test data: Well water was									gnm		
FI	11		Fet Vi	eld o	nm: Well	water was		ft after		hours pumping.	onm
'			WELL	WATER TO	) RE USEI	O AS: 5 Pul	olic water s	unnly	8 Air (	conditioning 11 In	iection well
N	y ≥- NE		1 Dom	estic 3 F	Feedlot	6 Oil fiel	d water sur	inlv	9 Dew	vatering 12 O	ther (Specify below)
W Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well											
SW   SE     Was a chemical/bacteriological sample submitted to Department?   Yes   No   Yes   Yes   No   Yes   Yes   No   Yes   Yes   Yes   No   Yes   Yes											
Was a chemical/bacteriological sample submitted to Department? Yes; If yes, mo/day/yrs Sample was submitted											
	S		Jumpio	5451111			,, 4	•11 4151		100 1911 211 110 1111	
5 TVD		SINC I	ICED.	5 Wearra	ht Inon	9 Cam	amata tila		CACINIC	G JOINTS: Glued.	Clampad
	c or cas <del>Ste</del> el	DING C	P (SR)	5 Wroug	nt iron os-Cement	8 Con	er (specify l	halaw)	CASING	JOINIS: Glued	Clamped
		2 KWL	r (SK)	7 Eibaral	os-Cemen	ı youn	or (Specify)	DCIOW)		weiueu.	
Plank o	oging diam	4 ADS	<u>'</u> 5	in to	ass) a	Diameter				Diameter	in to
2 PVC 4 ABS 7 Fiberglass Threaded  Blank casing diameter in to ft., Diameter in to ft., Diameter in to ft., Diameter in to ft.  Casing height above land surface ft. Wall thickness or guage No. 26											
TVPE	TEIGHT AUGU	N OD 1	SULTACE DEDEAD	ATION MA	TEDIAI	weight	<b>2</b>	JS./11.	wan unc	kness of guage No.	<b>a</b>
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass PVC 9 ABS 11 Other (Specify)											
1 Steel 3 Stainless Steel 5 Fiberglass (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 nunched 6 Wire wrapped 8 Saw out 10 Other (specify)											
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw cut 10 Other (specify)											
From ft to ft From ft to ft											
From											
				Fro	m	ft. to		ft	From	ft. to	ft.
6 GRO	UT MATI			at cement	2 Cement	grout (3 B	entonite	4 Other			
Grout In	itervals:	Fro	m7	ft. to .	24	. ft., From	<del></del> f	t. to	ft	., From	ft. toft.
				ble contamii							
	Septic tanl			Lateral line	s 7 Pit pr	ivy	10 Livesto	ck pens	13 Ins	ecticide storage	16 Other (specify
	Sewer line			Cess pool			11 Fuel sto			andoned water well	below)
	Watertight			Seepage pit	t 9 Feed		12 Fertilize	er storage	15 Oil	well/gas well	
	n from we	11?	<i>l.</i>	e of			How many	feet?			
FROM	TO			LITHOLOG	JC LOG		FROM	TO		PLUGGING INT	ERVALS
0	2		100	Soil							
à	1,3		Phu	1	- 4						
13	67	1	See	<u> </u>	Kal.						
67	80		imi	o to	re						
	<del>2</del>		<del>-                                    </del>								
					*****						
		<del>                                     </del>					1				
7 CONT	L FRACTOI	Pic UI	RIANDA	OWNED'S	CERTIFI	CATION	This water :	vell was f	Constr	ucted (2) reconstruct	ted or (3) plugged
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's Ligense No. (2.4) This Water Well Record was completed on my/day/year)											
malisas	water wei e business	nama :	of /	יייי אל אוסטואלייי	- (	. This yvale	her	signatur)	بالماتورور مالماتورور	1 A	
				noint nen Di	EASE PRES	S FIRMLY and				underline or of the c	orrect answers. Send ton
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or control the correct answers. Send togethree 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 <u>constructed</u> well. Visit us at											
785-296-5	522. Seno	d one	to WATE	R WELL O'	WNER and	retain one f	or your rec	ords. Fe	e of \$5.0	00 for each constructed	ed well. Visit us at
http://www	w.kdheks.gov	/waterwo	ell/index.hti	ml.							