4			WELL RECORD	Form WWC-	5 KSA 8	2a-1212			
LOCATION OF WAT	11	Fraction NUV/4	SW 1/4 N	W _{1/4} Se	ction Number	T Township	Number S	Range Number	
Distance and direction	from nearest town		dress of well if locate	d within city?	PW	< #		I II C	
WATER WELL OW	PProx	700	<u> </u>	0 1	100	<u> </u>			
RR#, St. Address, Box		HE	#2			Board o	of Agriculture I	Division of Water Resources	
City, State, ZIP Code	:					Applica	tion Number:		
LOCATE WELL'S LO AN "X" IN SECTION	CATION WITH 4 I BOX:	DEPTH OF CO	MPLETED WELL. 5.	4.17.	ft. ELE\	/ATION:	1317.1	7	
:		epin(s) Groundw FIL'S STATIC N	vater Encountered 1		πα Andel woled	. Z	π. 3	4-04-88	
	i_ "							mping gpm	
NW	NE Es							mping gpm	
w i								. to	
<u>" </u>	. !] '[w			5 Public wat			ing 11	Injection well	
sw	SE	1 Domestic		6 Oil field wa		•		Other (Specify below)	
	! w	2 Irrigation							
<u> </u>		as a chemical/ba itted	acteriological sample s	submitted to L		YesNo Vater Well Disinfe	• -	, mo/day/yr sample was sub No	
TYPE OF BLANK C			5 Wrought iron	8 Conc				d Clamped	
1 Steel	3 RMP (SR)		6 Asbestos-Cement	9 Other	(specify bel			ed	
2 PVC	Z ⁴ ARB in		7 Fiberglass				Threa	aded	
Blank casing diameter								in. to ft.	
Casing height a			n., weight			s./ft. Wall thickne	ss or gauge N	o	
TYPE OF SCREEN OF			5 Fiberglass	7 P\	_		Asbestos-ceme	• <i>1 1</i> 1	
	1 Steel 3 Stainless steel 2 Brass 4 Galvanized steel			` '			11 Other (specify)		
SCREEN OR PERFOR			6 Concrete tile 5 Gauze	ed wrapped		8 Saw cut		11 None (open hole)	
1 Continuous slot	3 Mill s	slot		wrapped		9 Drilled hole		. A	
2 Louvered shutte	er 4 Key	punched	7 Torch	cut		10 Other (spe	cify)	/H	
SCREEN-PERFORATE	D INTERVALS:							o	
ODAVEL DAG	NA INTERNAL O							o	
GHAVEL PAC	CK INTERVALS:	From						o	
GROUT MATERIAL:	1 Neat cerr		Cement grout	3 Bent				<u>o ft.</u>	
				ft.	to			ft. to	
What is the nearest sou						estock pens		bandoned water well	
1 Septic tank 4 Lateral lines		ines	7 Pit privy		11 Fuel storage		15 Oil well/Gas well		
2 Sewer lines 5 Cess pool			8 Sewage lagoon		12 Fertilizer storage		16 Other (specify below)		
	er lines 6 Seepage	e pit	9 Feedyard			ecticide storage	NONE.		
Direction from well? FROM TO		LITHOLOGIC L	OG	FROM,	How m	any feet?	PLUGGING II	NTERVALS	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Litti OL OGIO L		0	3	Topsoil		VILITALS	
				3/	50	Topsoil Bentonit	'e		
		-							
						-			
					-				
CONTRACTORIO	D I ANDOMOTES:	OFFICIENT		1	1	L			
CONTRACTOR'S O ompleted on (mo/day/y	H LANDOWNER'S							ler my juriediction and was	
Vater Well Contractor's							best of my knows	owledge and belief. Kansas	
nder the business nam		KDHE	IIIIS VVAIGI VV	on record Wi	s completed by (sigr		200	Merro	
INSTRUCTIONS: Use typ	pewriter or ball point pen.	. PLEASE PRESS FII	RMLY and PRINT clearly. Ple	ease fill in blanks	underline or cit	rcle the correct answer	s. Send top three	copies to Kansas Department	
of Health and Environme	ent. Bureau of Water. Tor	oeka, Kansas 66620-	7320. Telephone: 913-296-59	545 Send one to	WATER WELL	OWNER and retain of	ne for your records	• • • • • • • • • • • • • • • • • • • •	