		WA	TER WELL REC	ORD Form	n WWC-5	KSA 82a-	1212	ID No. W	هدر و	>				
1 LOCATION OF WATER WELL:			Fraction				Section Number		vnship Num	ber				
County:	-AHETTE	<u> </u>	M 14	5W 1/4	NE 14		36	т_	31	s	R	19	(E)W	
Distance ar	nd direction f	rom nearest tov	wn or city street a	address of well	if located w	ithin city?								
MONI	TORINL													
	WELL OWN	VER:) AG	ETTE CO	LADFI	W, NO	•								
 RR#. St. Ac	dress, Box	# : PO	BOX 128	3	, , ,	-		Bo	ard of Agric	culture. D	ivision of	Water F	Resources	
City, State,			PAUL K	5 667	71			Ap	plication N	umber:				
3 LOCATE	WELL'S LO	CATION WITH	4 DEPTH OF C	OMPLETED V	VELL	7.5	ft. EL	EVATION:	896.	40				
	SECTION		Depth(s) Grour				E	ft. 2		ft. 3			ft.	
	N		WELL'S STATE	C WATER LEV	EL 3.7	ft. bel	ow land s	urface measur	ed on mo/d	ay/yr	11/23	05		
	Wal	_ 8	Pur	mp test data:	Well water	was		ft. after		hours p	umping		gpm	
	-NW -		Est. Yield gpm: Well water was ft. after hours pumping										gpm	
	•		WELL WATER	-		ublic water			nditioning		jection w			
w	1	E	1 Domestic 2 Irrigation			il field wate	rsuppiy vo. 8. gard	len) (10 Monit	tering		ther (Spe			
VV	1		2 inigation	4 1110050	ilai / D	Uniestic (la	wii a gaiu	lett) (10 World	offing Weilla.	••••••				
	0.47	<u>-</u>							'					
	-SW -	- SE	Was a chemica	al/bacteriologic	al sample si	ubmitted to	Departme				no/day/yrs			
	<u> </u>		mitted					Water Well	Disinfected	? Yes		N	ا د	
	S													
5 TYPE (OF BLANK C	ASING USED:		5 Wrought in	ron	8 Concr	ete tile	CA	SING JOIN	TS: Glue	d	Clampe	d	
1 Stee		3 RMP (SI	R)	6 Asbestos-			(specify b	•						
2 PVC		4 ABS		7 Fiberglass										
			in. to											
Casing hei	ght above la	nd surface	40	in., weigh	nt			lbs./ft. W	all thicknes	s or guag	je No			
TYPE OF S	TYPE OF SCREEN OR PERFORATION MATERIAL:										nent			
	1 Steel 3 Stainless Steel 5 Fiberglass										1 Other (Specify) 2 None used (open hole)			
2 Bras	SS	4 Galvaniz	zea Steel	6 Concrete	tile	9 A	35		12 None	usea (or	en noie)			
SCREEN C	OR PERFOR	NATION OPENII				d wrapped		8 Saw			11 Non	e (open	hole)	
	tinuous slot		Mill slot		6 Wire w				ed holes er (specify)				4+	
2 Lou	vered shutter	r 4 K	(ey punched	_	7 Torch	_								
SCREEN-F	PERFORATE	ED INTERVALS		2_										
	004/51 04		From	,,,	ft. to	175	ft., l	From		ft. to			ft.	
(GHAVEL PAG	CK INTERVALS		<u>''</u>										
				• • • • • • • • • • • • • • • • • • • •	11. 10			1 10111			,			
6 GROU	JT MATERIA	L: Nea	at cement	2 Cement	t grout	3 Ber	tonite	4 Other						
Grout Inter	vals: Fron	n 0	ft. to8	ft Fro	om	3ft.	to	ft., F	rom		ft. to		ft.	
What is the			contamination:	,				Livestock pens			Abandone			
		7 Pit privy	11 Fuel storage				15 Oil well/Gas well							
1 Septic tank 4 Lateral lines 7 Pit priv 2 Sewer lines 5 Cess pool 8 Sewag						anoon		Fertilizer stora	ne		Other (spe			
		er lines 6 See	•		9 Feedyard	goon		Insecticide stor	-		J. 1. 1. (OP.	,	,	
Direction fr	-	1 111103 0 000	page pit	`	o i ocayara			v many feet?	ugo .					
			LITHOLOGI	0100		FROM		Villally leet:	DLU	CINC IN	NTERVAL	<u> </u>		
FROM	то		LITHOLOGI			FROM	то			JUING II	NIERVAL	.5		
	9.5			BURDE	<u> </u>		8		OUT					
9.5	25.8		ES TONG			8	11	F	ומסדעי	16_				
25.8	27.5	54	ALE											
					-									
7	ACTORIO O	ND I ANDOMES	EDIC OFFICIO	ATION: This	otor	611)	runtari (a	\ ranc==t===t=	d or (0) =1	laasa	dor mili	riodist's	on andc	
CONTR	on (mo/day)	H LANDOWNE	ER'S CERTIFICA	ATION: This wa	ater well wa	(I) const	ructed) (2	reconstructe	u, or (3) Pil	uggea un	iuer my ji	and ba	liof Konso	
Water We'l	Contractor's	Licence No	754									and be	ilei. Narisas	
	contractor s ousiness nan	. ~	1 7	_		vven necor	was con	npieted on (mc by (signature	• 37		3 F			
		1,4-4	AERTON & F						<u> </u>	sof k		m	-1-11	
INSTRUC	TIONS: Use type	ewriter or ball point p	oen. <i>PLEASE PRĚSS</i>	FIRMLY and PRINT	Clearly. Please	fill in blanks, u	nderline or ci	rcle the correct ans	wers. Send top	three copie	es to Kansås	Departme	nt of Health	

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correct 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 <u>constructed</u> well.