	WATER V		TER WELL RE	,	Form WWC-		tion Number	No er Township	Number	R	angę Nu	mber
ounty: W/	NEZZ		NU	پری پ	2 -	. 1/4	25	· · · · · · · · · · · · · · · · · · ·		R	13	E/W
istance and direc	tion from r	earest tow	n or city stree	t address o	f well if locate	d within city? 2	2-2-1	215+		,		
						7	DO K					
WATER WELL	OWNER:	East	~ Core	1100	r m 012							
RR#, St. Address,	Box # :		N 21			, -	2081	Board of	f Agriculture,	Division o	f Water F	Resource
city, State, ZIP Co	de :	Ind	epon	و مرو	_, KS	., le	1301		ion Number:			
LOCATE WELL'S	S LOCATIO	HTIW NO	4 DEPTH OF	COMPLE	red Well	17	ft. ELE	VATION:				
AN "X" IN SECT			Depth(s) Gro	undwater E	ncountered -			ft. 2	ft.	3		. <u></u> ft.
	N		WELL'S STAT	FIC WATE	RLEVEL	/≲ft . belo	ow land sur	face measured on	mo/day/yr	4-15		7
1	7 1		Fot Viold	ump test o	ata: Well wa	ter was	/ -//	t. after t. after	hours	pumping		gp
NW-	- NE		WELL WATE	R TO BE L	SED AS:	Public water	vlaque	8 Air condition	ning 11	Injection w	/ell	9P
!	!		1 Domest		eedlot 6	Oil field water	rsupply	9 Dewatering	12,	Other (Sp	ecify belo	ow)
w	+	—— E	2 Irrigatio	n 4 lı	ndustrial 7	Domestic (lav	vn & garder	n) 10 Monitoring	well	U.J.S.		
*	1											
SW-	SE		Was a chemi	cal/bacterio	ological sampl	e submitted to	Department	? Yes No	: If yes,	mo/day/yr	s sample	was su
1	- 1		mitted				•	Water Well Disinfe	ected? Yes		M	
<u> </u>	S											
TYPE OF BLA		G USED:		5 Wrot	ight iron	8 Concre	ete tile	CASING	JOINTS: Glu	ed	Clampe	ed
1 Steel 3 RMP (SR)				stos-Cement		(specify bel		Welded				
2 PVC		ABS		7 Fibe	•					eaded		
Blank casing diam	eter			— . • ·				ft.,				<i>''</i> '
Casing height abo	ve land su	face		in.,	weight	_		Ibs./ft. Wall thic	kness or gua	age Ne.S	4.9	<i> </i> U
YPE OF SCREE						⊘ PV	-		Asbestos-Ce			
1 Steel 3 Stainless Steel 2 Brass 4 Galvanized Steel								MP (SR) 11 Other (Specify) S 12 None used (ope				•••••
2 Brass				6 Con		9 A E	5	12	None usea (
SCREEN OR PER	FORATIO					azed wrapped		8 Saw cut		11 Non	e (open	hole)
1 Continuous		3M				e wrapped ch cut		9 Drilled hol 10 Other (spe				
2 Louvered sh			ey punched	14				, ,				
CREEN-PERFO	RATED IN	TERVALS:	From		ft. to		ft., Fro	mc mc	ft. 1	0	•••••	••••••
GRAVE	PACK IN	TERVALS:						om				
G1 17 17 E1								om				
GROUT MATE			cement		ment grout		tonite	4 Other				
		•			t., From	ft. 1		ft., From				
Vhat is the neares		•		:				estock pens		Abandone		
	1 Septic tank 4 Lateral lines				7 Pit privy			el storage	15	Oil well/Gas well Other (specify below)		
	2 Sewer lines 5 Cess pool				8 Sewage lagoon			rtilizer storage	(16)	Other (spe	ecify belo	pw)
3 Watertight sewer lines 6 Seepage pit				9 Feedyard			ecticide storage	.I.la	1 M	/-/	<u> </u>	
Direction from well								nany feet?	<u> </u>			
FROM TO)	~1	LITHOLOG	IC LOG		FROM	ТО		PLUGGING I	NTERVAL	.S	
		5/17	ty cla	4.1								
9 /		Sal	alles S	31/H-								
		<i></i>	and a									
			-									
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CONTRACTOR	20 OD 141	NDO/Pric	חים מבחדובים	ATION	ile weter"	woo (4)	usted (2)	oonatriista ''	2) ple-====	ndor !-	wodic+!-	n ond .
CONTRACTOR	'S OR LA	NDOWNE	B'S CERTIEIC	ATION: Th	nis water well	was (1) constr	ucted, (2) r	econstructed, or (3) plugged u	nder my ju	urisdictio	n and w
mpleted on (mo/d	day/year)	4-5	-05				and this	record is true to th	e best of pay	nder my ju	ırisdictio and beli	n and wief. Kans
mpleted on (mo/d	day/year) ctor's Licer	4-5	-05				and this was compl	econstructed, or (; record is true to the eted on (mo/day/yoy (signature)	e best of pay	nder my ju	urisdictio and beli	n and vief. Kans

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 Healt 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.