e ^B a			WAT	ER WELL RECORD	Form WWC-5	KSA 82a-		
	N OF WAT		Fraction		Sect	ion Number	Township Numb	1 1
County:	Monta	omery		1/4 SZ 1/4 N	<u>- 1/4</u>	31_	т 33	S R 6 EM
Distance a	nd direction	from nearest tow	n or city street	address of well if located	within city?	ST /		T K NATTH
<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>	114 4	h Dop	once on 1	0 17	2 11	Alle Tis	T -5 NorTH
,		NER: Larry	Shane a	and wendy Kay	, 1512		S 1.7 A. d	
	ddress, Box		Box 9					culture, Division of Water Resour
City, State,	ZIP Code	- Inq	rependen	<u> </u>	120		Application Nu	ımber:
LOCATE	: WELL'S LO IN SECTION	OCATION WITH	4 DEPTH OF	COMPLETED WELL		ft. ELEVAT	rion:	
AIT A	N OLOTION	1 1						ft. 3
ā l	!	!!!						o/day/yr
_	- NW	NE						ours pumping g
l	1	- 1	Est. Yield	O gpm: Well water	was	ft. af	ter h	ours pumping
* w -		E						in. to
∑	-	!			5 Public water		8 Air conditioning	•
ı -	_ sw	SE	1 Domest					12 Other (Specify below)
1	- 1	•	2 Irrigation					. If you mo/dow/w comple was a
Į L				al/bacteriological sample s	ubmitted to De			.; If yes, mo/day/yr sample was s
- .T <i></i>	<u> </u>	10000	mitted	C 144	0.00000		er Well Disinfected?	S: Glued Clamped
-		ASING USED:	- \	5 Wrought iron	8 Concre			Welded Olamped
1 Ste	-	3 RMP (SF	4)	6 Asbestos-Cement		specify below	•	Threaded
PV PV		4 ABS	•	7 Fiberglass			ft Die	in. to
Blank casir	ng diameter		.in. to	π., Dia			t Wall thickness or a	gauge No.
-			-	in., weight/ D.	PV		10 Asbest	
		R PERFORATION		E Eibergloop		P (SR)		specify) 🚣
1 Ste		3 Stainless		5 Fiberglass 6 Concrete tile	9 ABS			sed (open hole)
2 Bra		4 Galvaniz RATION OPENIN			d wrapped	,	8 Saw cut	11 None (open hole)
			ill slot		vrapped	•	9 Drilled holes	The traine (epotations)
	ntinuous slo uvered shutt		ey punched	7 Torch	• •		10 Other (specify) .	
		ED INTERVALS:	From			ft Fron		ft. to 8 D
JOHLLIN	LIN ONATE	D INTERIVACO.	From					ft. to
G	RAVEL PA	CK INTERVALS:		130 ft. to	25	ft., Fron	n	ft. to
_			From	ft. to	-	ft., Fron		
GROUT	MATERIAL	: Neat o	ement	2 Cement grout	3 Bento	nite 4	Other	
Grout Inter	vals: Fror			ft., From	ft.	to	ft., From	ft. to
What is the		urce of possible					ock pens	14 Abandoned water well
		4 Later		7 Pit privy		11 Fuels	storage	15 Oil well/Gas well
2 Sewer lines 5 Cess po		pool	8 Sewage lago	on	12 Fertilizer storage		16 Other (specify below)	
3 Wa	tertight sew	er lines 6 Seep	age pit	9 Feedyard		13 Insect	ticide storage ,	
Direction for						How mar		•
FROM	ΤQ		LITHOLOGI	C LOG	FROM	то	PLUG	GING INTERVALS
\mathcal{O}	_4	5 6 MD						
4	50	SSAD	500	ne				
50	80	54210	<u>e</u>		_			
80	92	WITC	2/5=1	D WHITS				
92	-/00	SHOL	e	- , ,				
160	120	11,00	<u> </u>					
120	130	5421	e					
	. , -	- 1 9.						
				MA				
					ļ			
								1-0-1
Z CONTE	RACTOR'S	OR LANDOWNER	R'S CERTIFICA	TION: This water well wa	s (1) construc	(2) reco	nstructed, or (3) plug	ged under my jurisdiction and v
completed	on (mo/day/	(vear)				and this recor	d is true to the best of	of my knowledge and belief. Kans
Water Wel	Contractor'	s License No. <u>5</u>	.1.2	This Water W	ell Record wa	s completed of	on (mo/day/yr)	1.60.11
under the I	husiness na	me of	FES	woll And	limo	by (signat	ure) /	2 RAeller

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT 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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.