1 LOCATIO	Fraction	1				Section	n Number	Tow	vnship Numb	er	Ran	ge Number			
County:	Montg	omery	sw	1/4	SW	½ SE	1/4		31	Т	348	s	R	16 [E
	d direction from	n nearest to	wn or city st	eet addre	ess of we	ell if located	within c	ity?				<u> </u>			
	den St C														
	WELL OWNER				s Ref	ining and	Marl	keting	LLC						
	dress, Box #								,	D	d a.f. A!	Dh.d.		-4 D	
						230					d of Agricultu		SION OF VV	ater Resour	ces
City, State, 2	VELL'S LOC	ATONIA/ITI	as City, r	13 00 11	03					Applic	cation Numb	er:		., .	
3 AN "X" IN	SECTION BO	OX:	4 DEPTI	OF COL	MPLETE	D WELL		18	ft FIF\	VATION:		716	.87 TO	C	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	i i														0
	Depth(s) Groundwater Encountered 1 12.5 ft. 2 ft. 3 WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr											- " 丑			
 	NW	NE	WELL'S S												
	į	į		Pump te	est data:	Well water	er was		f	ft. after		hours po	umping	9	pm US
₹ w	- - -	- E	Est. Yield		apm:	Well water	er was		f	ft. after		hours of	pniamu	a	om I m
7	E Est. Yield gpm: Well water was ft. after hours pumping Bore Hole Diameter 8 in. to 18 ft. and in. to WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specific										ft. ONLY				
	SW								Injectio	n well	즉				
	i	i	1 Do	mestic	3 Feed	lot 6 (Oil field	water si	ipply	9 De	watering	12	Other (Specify belo	w)
* L_	<u>i x</u>		2 Irri	gation	4 Indu	strial 7 L	_awn an	d garde	n (domesti	c) 10 N	Monitorina we	eli			
	2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well														
	Was a chemical/bacteriological sample submitted to Department? Yes No X If yes, mo/day/yr sample was														as
submitted Water Well Disinfected? Yes No X															
5 TYPE OF	5 TYPE OF BLANK CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped														
1 Ste	el	3 RMP	(SR)		6 Asbe	stos-Cemer	nt 9 (Other (s	pecify belo	ow)		Welde	ed		
2 PV	3	4 ABS			7 Fiber	rolass						Thread	led	Flush	
												1111000			_
Blank casing	diameter nt above land	-	In. to		· π.,	Dia	~~~~	- In. to		^{ft.} , Dia		 -	in. to		- ^{π.}
Casing heigl	nt above land	surface	36	in.	., weight	·	0.703	·	lbs./ft.	Wall thic	kness or gau	uge No.		SCH. 40	
TYPE OF S	CREEN OR P	ERFORATIO	ON MATERIA					7 P	VC		10 Asbesto	s-ceme	nt		
1 Ste	el		iless steel		5 Fiber	rgiass		8 8	(MP (SR)		11 Other (s	specify)			
2 Bra		4 Galva	anized steel		6 Cond	crete tile		9 A	BS		12 None us	sed (ope	n hole)		¬
SCREEN OF	R PERFORAT	ION OPENI	NGS ARE:			5 Gau	zed wra	pped		8 Sav	v cut			e (open hole	e)
1 Cor	ntinuous slot	3	Mill slot			6 Wire	wrappe	d		9 Drill					
2 Lou	vered shutter					7 Torc				10 Oth	er (specify)				
•	ERFORATED		Erom	5	2	ft to		12	4 (From		4 4			#
SUREEIV-FE	EKFOKATED	INTERVAL	5. FIOIII			". "			''. '			! !!			- ".
			From			^{ft. to}			ft. f	From		ft. to	·		- ^{ft.} 20
GRA	AVEL PACK IN	ITERVALS:	From		5	ft. to		18	ft. F	From		ft. to	0		_ft.
			From			ft. to			ft. I	From		ft. to	0		ft.
6 GROUT	MATERIAL:	1 Neat	t cement	2 C	ement c	rout		3 Bento	onite	4 Other					
Grout Interv	ale From	1	ft to	4											
	als From				IL. FIC			11. 10	40 11	^{IL.}	From				- "-
1	nearest source	•							10 Lives					water well	i
	otic tank		4 Latera			7 Pit priv			11 Fuel				well/ Gas		
	ver lines					8 Sewage		ו	12 Fertil	lizer stora	ge	16 Oth	er (spec	ify below)	
3 Wa	tertight sewer	lines	6 Seepa	ge pit		9 Feedya	ard		13 Insec	cticide sto	rage				
Direction fro									How many	feet?					
FROM	ТО	CODE		ITHOLO	GIC LO	3	FI	ROM	то		PLUG	GING IN	ITERVAL	<u>-</u> S	
0	2.5		o Recove												
2.5	7.5		lay with												# #
7.5	12.5		lay with												
12.5	18	С	layey Sa	nd											
															
-							_			 					
7 CONTRA	ACTOR'S OR	L ANDOWN!	ED'S CEDTI	FICATIO	M: This	water well	ac (1) a	onetruct	od (2) ross	onetructor	1 or (3) place	and und	ar my in-	ediction and	was
<u> </u>			LINGUERII			water well W				\sim				<i>I</i> :	1
	n (mo/day/yr)			5/3/0							e best of my				
Water Well	Contractor's Li	cense No.			531			This Wa	ater Well R	Record yra	s completed	e n(m9/	/day/xr)	// 8/8/0	6
	siness name		Geote	chnica	I Serv	ices Inc.			(signature)		Uxor		4	Щ_	
INSTRU	JCTIONS:. Ple	ase fill in blar	nks and circle	the correc	t answer	s. Send three	copies t	to Kansa	s Departme	nt of Healt	h and Enviror	nment, Bi	ureau of V	Vater, 1000 S	W
Jackson	n St., Ste. 420,	Topeka, Kans	sas 66612-13	37. Telep	hone: 91	3-296-5545.	Send on	e to WA	TER WELL	OWNER a	and retain one	for your	records.		

WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.