			ATER WELL REC	CORD Form WWC-	5 KSA 82	a-1212 ID No	•			
1 LOCA	TJON OF WA	TER WELL:	Fraction		s	ection Number	Township Num	ber Range Numbe	ər	
County: (HCROI	lee_	1/4	1/4	1/4	26	_ ⊺ 34	s R 25	E/W	
Distance a	and direction	from nearest to	wn or city street	address of well if locate	ed within city?					
29	07 56	al GRC	ck Rio	/~ a	•					
2 WATE	R WELL OW	NER: 7	·/ / / / / / / / / / / / / / / / / / /	NNA Who	1 _					
	alalakan Basa	IRO	XYUIA	NNA WAO	a contract and the first terms of the first	Company of the	Bullion Le Admin	ander Bereite Lewise B. S		
City State	ogress, Box , ZIP Code	# 290	Short	CREEK Ridg	·C		Board of Agric Application Nu	ulture, Division of Water Resomber:	ources	
Oity, State	, ZIF Code	CAIC.	NA. KS.	COMPLETED WELL	***	4 FLEVAT	Application Nu	inipor.	-	
			4 DEPTH OF	COMPLETED WELL	• • • • • • • • • • • • • • • • • • • •	IL ELEVAI	ION			
AN "X" I	N SECTION	BOX:	Depth(s) Grou	ndwater Encountered	1	<i>[</i>	2 . 5. 5. 6	ft. 3	ft.	
	1	ı	WELLSSIAII	C WAIER LEVEL	⊀π. be	elow land surface	e measured on mo/da	ay/yr 8-//-05 hours pumping		
	1 .	1						hours pumping		
-	-NW -	- NE					8 Air conditioning		gpii	
	1	F	1 Domestic	3 Feedlot	6 Oil field wat	er supply	9 Dewatering	12 Other (Specify below)		
w		 E	2 Irrigation) 4 Industrial	7 Domestic (I	awn & garden) 1	0 Monitoring well	12 Guior (Opcony Bolow)		
		<u> </u>	YARd							
	-sw	- SE	Mas a shamis	al/baatarialaaisal samal	la aubmittad t	n Donortmant? V	(5)	If you ma/day/yra cample wa	aa aub	
		<u> </u>	mitted	Was a chemical/bacteriological sample submitted to Department? Yes(No); If yes, mo/day/yrs sample was mitted Water Well Disinfected? Yes No						
		i	milled	Water Well Distributed: 165						
	Ś									
5 TYPE	OF BLANK	CASING USED:		5 Wrought iron	8 Cond	crete tile	CASING JOINT	S: Glued Clamped		
1 Ste		3 RMP (S	R)	6 Asbestos-Cement		r (specify below)		Welded		
2 PV	C	4 ABS	51	7 Fiberglass	••••••	•••••		Threaded		
								in. to		
Casing he	ight above la	and surface		in., weight	./3	1	bs./ft. Wall thickness	or guage No. 1.8.8		
TYPE OF	SCREEN O	R PERFORATIO	ON MATERIAL:		7 F	PVC	10 Asbest	tos-Cement		
1 Steel 3 Stainless Steel			s Steel	5 Fiberglass		RMP (SR)	11 Other (11 Other (Specify)		
2 Brass 4 Galvanize			zed Steel	6 Concrete tile 9		\BS	12 None (12 None used (open hole)		
SCREEN	OR PERFO	RATION OPENII	NGS ARE:	5 Gu	azed wrapped	4	8 Saw cut	11 None (open hole	e)	
l .	ntinuous slot		Aill slot		re wrapped	•	9 Drilled holes	Tritone (epen new	Ο,	
1	vered shutte		Key punched		rch cut		10 Other (specify)		ft.	
				4. 4.		4 F	., .,	ft. to	4	
SCHEEN-	PERFORAI	ED INTERVALS						ft. to		
	GRAVEL PA	CK INTERVALS						ft. to		
	G	011111111111111111111111111111111111111						ft. to		
	UT MATERIA		it cement	2 Cement grout						
Grout Inte	rvals: Fro	m <i>O</i>	ft. to	5.0 ft., From	ft	. to	ft., From	ft. to	ft.	
What is th	ie nearest sc	urce of possible	contamination:			10 Livesto	ock pens	14 Abandoned water well	il	
Septic tank 4 Lateral lines			ral lines	7 Pit priv	/y	11 Fuel st	orage	15 Oil well/Gas well		
2 Sewer lines 5 Cess po			s pool	8 Sewage lagoon		12 Fertiliz	er storage	16 Other (specify below)		
3 Watertight sewer lines 6 Seepag			•	9 Feedyard			cide storage	, , , , , , , , , , , , , , , , , , , ,		
Direction f	_		P. 90 P.	0 . 554)		How many	·	0 +		
FROM	TO		LITHOLOGIC	C I OG	FROM	TO		GING INTERVALS		
	 ,,	01/0 0 /		C LOG	FROW	+ ,0 +	FLOGIC	SING INTERVALS		
0	16		yeden			1				
16	144	white	LIME							
144	357	GREY	LIME							
		/								
							<u></u>			
						+				
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		1								
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								<u> </u>		
7 CONTE	ACTORIO (D'S CEDITIES	TION: This water"	woo /1V	trusted (a) ====	notruoted or (0) while	and under my furiadistics	nd was	
	1AUTUR'S (ル LANDOWNE	TO CERTIFICA	ATION: This water well	was (1 cons	ructed, (2) recol	istructed, or (3) plug	ged under my jurisdiction an	iu was	
completed	on (mo/day/)	rear)a	499	This Wat		and this rec	ord is true to the best	of my knowledge and belief. K	\ansas	
								1.1		
under the b	ousiness nan	ie or Tiche	WOR DE	illing INC.			ignature) Jean	Jichena		
INSTRUC	TIONS: Use type	ewriter or ball point po	en. <i>PLEASE PRESS F</i>	FIRMLY and PRINT clearly. Ple	ease fili in blanks, u			ree copies to Kansas Department of H	lealth	
		of Water, Geology Se each <u>constructed</u> well		son St., Suite 420, Topeka, Kar	isas 66612-1367.	тегерлопе 785-296-55	∠∠. Send one to WATER W	ELL OWNER and retain one for your		
1										