	WAT	ER WELL RECORD	Form WWC-5	KSA 82a-			
LOCATION OF WATER WELL:	Fraction	11.1	Sect	tion Number	Township Number	Range Number	
County: COWLEY	NW 1		W 1/4		т 35 s	I R 4 CEDV	
Distance and direction from nearest to 1400 South M			AS CITY	KANS	1-5		
WATER WELL OWNER: TOTAL	AL PETROL	EUM) INC			LAID OPFSET	•	
0 -	_ ~ ~ ~ ~ ~	, ,	_	ove.		, Division of Water Resource	
ity, State, ZIP Code : ANANSAS GTY		FANSAS 6/003			Application Number:		
LOCATE WELL'S LOCATION WIT AN "X" IN SECTION BOX:	Depth(s) Groun	dwater Encountered 1	. <b></b> 	ft. 2.	ft.	3	
X	Pun Est. Yield	np test data: Well wate	er was	د ft. aft. ft. aft	er hours per hours p	oumping	
w i i i i i i i i i i i i i i i i i i i	EI	_		•	nd <i>30</i>		
		TO BE USED AS:			3 Air conditioning 1	•	
SW SE	1 Domestic				Dewatering 12		
	2 Irrigation		-	-	0 Monitoring well,	es, mo/day/yr sample was sul	
	mitted	/bacteriological sample	submitted to De	-	er Well Disinfected? Yes	s, mordayryr sample was su No	
TYPE OF BLANK CASING USED		5 Wrought iron	8 Concre			ed Clamped	
Steel 3 RMP (	(SR)	6 Asbestos-Cement	9 Other (	specify below	) We	lded	
2 PVC 4 ABS		7 Fiberglass				eaded	
Blank casing diameter							
Casing height above land surface		in., weight					
TYPE OF SCREEN OR PERFORATI			7 PV		10 Asbestos-cer		
1 Steel 3 Stainle		5 Fiberglass	8 RM		• •	y)	
	nized steel	6 Concrete tile	9 ABS	5	12 None used (c		
CREEN OR PERFORATION OPEN	Mill slot	The state of the s	ed wrapped wrapped		8 Saw cut	11 None (open hole)	
	Key punched	7 Torch			9 Drilled holes		
GRAVEL PACK INTERVALS	From	ft. to		ft., From	ft.	tofi toff to ff	
	t cement	2 Cement group	3 Bentor				
Grout Intervals: From		π., From	π. τ				
1 Septic tank 4 Lat		7 Pit privy		10 Livesto	•	Abandoned water well	
•	ss pool	8 Sewage lag	000		torage 15 er storage 16	Other (specify below)	
3 Watertight sewer lines 6 See	•	9 Feedvard	0011			STONAGE	
Direction from well?		o i oodyala		How many		· · · · · · · · · · · · · · · · · · ·	
FROM TO	LITHOLOGIC	LOG	FROM	ТО		INTERVALS	
0 5 FINE SI	LTY SAND						
		TO MED SAND					
10 20 FINE 10			_				
		AND W/ CANCES					
	COANSE						
		E SMINGERS	4				
39 39.5 WENTHERE	D UMCSTVN	e a grey shm	4	· · · · · · · · · · · · · · · · · · ·			
CONTRACTOR'S OR LANDOWN	ER'S CERTIFICAT	ION: This water well w	as (1) construc	ted, (2) recon	structed, or (3) plugged up	nder my jurisdiction and wa	
CONTRACTOR'S OR LANDOWNI	13-91			and this record	is true to the best of my k	nowledge and belief. Kansa	
Vater Well Contractor's License No.		This Water W				_ ^~	
nder the business name of			-	by (signatu		Hoas te	
INSTRUCTIONS: Use typewriter or ball point	int pen. PLEASE PRESS	FIRMLY and PRINT clearly. Pl				e copies to Kansas Department	
of Health and Environment Duranu of Mat	or Topoka Kanaga 660	20,0001 Telephone: 012,206.	545 Sand one to V	MATCH WELL OW	MED and rotain one for your rocal	-d-	