WATER WELL RECORD	Form WWC-5	Division of Water Resources; App. No.			
1 LOCATION OF WATER WELL: County: JACUSON	Fraction SW 1/4 SW 1/4 SW 1/4	Section Number 28	Township Number T S	Range Number R /4/EW	
Distance and direction from nearest town or city street address of well if Global Positioning Systems (decimal degrees, min. of 4 digits)					
located within city? //ZWEST , / SOVYH OF CIRCLEVILLE		Latitude:			
2 WATER WELL OWNER: AAN SHE RR#, St. Address, Box # : 722 0 24	UPE				
RR#, St. Address, Box # : 722 O 24 City, State, ZIP Code : 200	BTH RO	Datum:			
City, State, ZIP Code : CIRCLEVILLE, MS 664/6 Data Collection Method: 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL					
LOCATION DELITION CONTINUE WELL					
WITH AN "X" IN Depth(s) Groundwater					
SECTION BOX: WELL'S STATIC WA Pump test data	Pump test data: Well water wasft. after hours pumping gpm				
	Est. Yield. 3.0gpm: Well water was				
WELL WATER TO BE USED AS: 5 Public water supply NW NW NE E WELL WATER TO BE USED AS: 5 Public water supply Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 11 Injection well 12 Other (Specify below)					
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well					
Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs					
Sample was submitted					
S					
5 TYPE OF CASING USED: 5 Wrought I 1 Steel 3 RMP (SR) 6 Asbestos-	ron 8 Concrete tile Cement 9 Other (speci		G JOINTS: Glued	Clamped	
2 PVC) 4 ABS 7 Fiberglass	*************	- 	Threaded	1	
Blank casing diameter					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)					
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)					
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From					
From					
GRAVEL PACK INTERVALS: From					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
What is the nearest source of possible contamination:					
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below)					
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well					
Direction from well? LITHOLOGIC		any feet? Z.O.O. M TO	PLUGGING INT	FRVALS	
O 5 BROWN CLAY	TRO	10	1 LOGGING INI		
5 28 TAN CLAY					
74 95 SHERT GRAVES	,				
95 110 LIMESTUNE (SO					
110 11 LIMESTONE (HE			A A A A A A A A A A A A A A A A A A A		
111 123 GRAY SUALE 123 124 CAVEEN					
124 188 GRAY SHALE					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed, or (3) plugged					
under my jurisdiction and was completed on (mo/day/year) 2.2.2.2					
Kansas Water Well Contractor's License No. 5.7.8 This Water Well Record was completed on (mo/day/year)					
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, 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 constructed well. Visit us at					
http://www.kdheks.gov/waterwell/index.html.					