WATER WELL RECORD			Form WWC-	5	Division	n of Wate	r Resources; App. No		
ł	1 LOCATION OF WATER WELL: County: Riley		Fraction NW 1/4 NE 1/4 /		Section N	umber	Township Number	Range Number	
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? Latitude: 39.5369/									
Longitude: 96. 73922									
2 WATER WELL OWNER: (L/19/10/10/12) PRING Elevation: 1325									
City	State 711	P. Code : 30/6 Sicylo	yor Bu	RLL	Datum:				
2 WATER WELL OWNER: CLAYION HUME SHIPS Elevation: 1325  RR#, St. Address, Box # : 5016 Skyway Dr. Ewell Datum:  City, State, ZIP Code : Manha Han, KS 65503  Data Collection Method:									
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL									
	LOCATION WITH AN "X" IN Depth(s) Groundwater Encountered (1)73ft. (2)75ft. (3)								
	WITH AN "X" IN SECTION BOX:  Depth(s) Groundwater Encountered (1)73 ft. (2)75 ft. (3)ft. WELL'S STATIC WATER LEVEL65ft. below land surface measured on mo/day/yr.3/2407								
SEC	N Pump test data: Well water was								
	Pump test data: Well water was ft. after hours pumping gpm Est. Yield. 80 t. gpm: Well water was ft. after hours pumping gpm								
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well									
W         E   Domestic \( \) 3 Feedlot \( \) 6 Oil field water supply \( \) 9 Dewatering \( \) 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									
Sample was submitted									
5 TYPI	E OF CAS	ING USED: 5 Wrought I	ron 8 Conc	rete tile		CASINO	GIOINTS: Glued	Clamped	
1	Steel	3 RMP (SR) 6 Asbestos-	Cement 9 Other	(specify	below)		Welded	İ	
2	PVC	4 ABS 7 Fiberglass					Thread	ed	
PVC 4 ABS 7 Fiberglass Threaded  Blank casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft.  Casing height above land surface in., Weight lbs./ft. Wall thickness or guage No. 52424									
Casing height above land surface									
1		N OR PERFORATION MATE		0.4	DC		11 Other (Conseile	->	
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)									
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 ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From ft. to ft., From ft. o ft.									
	UKAVEL	From	<b>Z.</b> ft. to	75	Il.,	From	11. 10. ft. to	II.	
		110111.				1 10111			
1		ERIAL: 1 Neat cement 2 C	Cement grout Ber	ntonile	4 Other				
Grout In		From ft. to		7.5	ft. to . <b>B</b> .	<b>&gt;</b> ft	., From	ft. toft.	
		source of possible contaminati		O.T.:4	-1	12	41-144	(01)	
	Septic tank			0 Livesto			ecticide 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?									
FROM	TO	LITHOLOGIC		FROM			PLUGGING IN		
0	2	SOIL							
0 2	5	LIMESTONE							
5	35	SHALL TAN							
5 35 4/ 75 76	41	LAMESTONE							
4/		SHALE, GRAY			-				
15	76	LIMESTONE BROKEN	~8GPM		-				
16	95	SHALE CRAY	e Ne A a Day as			***			
90	98 114	LIME TOWE, WEATH	MATEL OUGHN						
10	117	SHI UL.							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:, This water well was (1) constructed. (2) reconstructed. or (3) plugged									
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) 3/2/07 and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No									
Kansas Water Well Contractor's License No(Q) This Water Well Record was completed on (mo/day/year)									
under the	e business	name of HSSOCRAPHO A	MILLIAN IN	∠ by	(signatur	re)	MALI		
INSTRUC	CTIONS: Us	se typewriter or ball point pen. PLEAS	SE PRESS FIRMLY and P.	RINT clearl	y. Please fil	l 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.									