LOCAT	ION OF WA	WAT TER WELL:	Fraction		Form WWC-5	KSA 82a	-1212 JD N ection Number		mher	Range N	umber
ounty:	RI	cy	WE 1/4		1/4 NW	/4	28	т 7	(S)	R E	2/w
istance a	nd direction	from nearest towr	n or city street a	ddress of	well if located	within city?	From	Anndolph	6.	f Mill	Sout
	WELL OW	- 1/		prde	lph						
•	ddress, Box ZIP Code	# : 077	Vaildi	ارد کسی	6655			Application N	Number:	ivision of Water	
		CATION WITH 4				•		ATION:			
AN "X" IN	N SECTION	BOX:	Depth(s) Ground WELL'S STATIO	dwater Er	countered	ريك <u>ي</u> 1 ft he	t	t. 2 ce measured on mo/	ft. 3 . day/yr	••••••••••••	ft.
w	-NW	, , , , , , , , , , , , , , , , , , ,	Pעק	np test da gp FO BE US 3 Fe	ta: Well wate m: Well wate ED AS: 5 edlot 6	r was was . Public water Oil field water	supply ar supply	after	hours pt hours pt 11 In 12 O	umping umpingi jection well ther (Specify be	gpr gpr elow)
	-SW		Was a chemical mitted	/bacteriol	ogical sample	submitted to	Department?	Yes No/ater Well Disinfect	; If ves. m ? Yes		le was sub No
TYPE (S OF BLANK (CASING USED:		5 Wroug	ıht iron	8 Conc	rete tile	CASING JOIN	NTS: Glued		ed
1 Stee 2 PVC		3 RMP (SR))	6 Asbes	tos-Cement-	9 Other	specify belea		Weld	be	
		Was 5	in to	7 Fiberg			V. Spr.			aded	
asing hei	ght above la	and surface .C.U	FOFF 3	1/4	eight 6/ou	r-d		ft., Dia . lbs./ft. Wall thicknes	ss or quag	 e No	
		R PERFORATION	I MATERIAL: 🔎	7		7 P			estos-Cem		,
1 Stee		3 Stainless		5 Fiberg			MP (SR)				
2 Bras	-	4 Galvanize		6 Concr		9 A			e used (op	•	
1 Con	tinuous slot vered shutte		,			ed wrapped wrapped cut		8 Saw cut 9 Drilled holes 10 Other (specify))	11 None (ope	,
		ED INTERVALS:			ft. to		ft From)			
	GRAVEL PA	CK INTERVALS:	From From		ft. to 2 ft. to	8z	ft., Fron)))	ft. to		f
GROU	T MATERIA			2 ∕ Cen	nent grout	(3 Ber	ntonite)	4 Other			
rout Inter	vals: Fro	n <i>3</i>	ft. to <i>64</i>	2.' ft.,	From	ft.	to	ft., From		ft. to	f
		urce of possible c						stock pens	14 A	bandoned wate	r well
1 Septic tank 4 Lateral lines 2 Sewer lines 5 Cess pool				• •				el storage 15 Oil well/Gas well			
2 Sewer lines 5 Cess pool 3 Watertight sewer lines 6 Seepage pit				_				ilizer storage 16 Other (specify below) cticide storage			
	om well?		.90 p.i.		o i oodyan	•	How ma	~	***************************************	***************************************	***************************************
FROM	то		LITHOLOGIC	LOG		FROM	ТО		GGING IN	TERVALS	
0	3	Compi	etil C	Lave							
3	60	Bento	NITE.	,							
60	82	Chlori	metal 61	CAUL	. I Sant s						
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CONTR	ACTOR'S	OR LANDOWNER	'S CERTIFICAT	JON: This	water well w	as (1) const	ructed, (2) rec	onstructed or (3) pla	ugged und	er my jurisdicti	on and wa
mpleted o	on (mo/day/)	/ear) Licence No	45/	200			and this re	ecord is true to the be ed on (mo/day/yr)	et of my kn	owledge and be	lief. Kansa
der the b	usiness nan	ne of	anson	un	e Wik	las	by	(signature)	sein a	4/2	WOR
INSTRUC	FIONS: Use type	ewriter or ball point pen.	PLEASE PRESS FI	RMLY and P	RINT clearly. Please	fill in blanks, u	nderline or circle the	e correct answers. Send top	three opies	to Kansas Departme	ent of Health

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 opies to Kansas Department of Healt and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66912-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.