WATER WELL RECORD		Form WWC-5	5	Division of Water Resources; App. No.				
1 LOCATION County: Pa	OF WATER WELL: OT TAU ATOMIE	Fraction NE 1/4 SE 1/4 SE	- 1/4	Section N	Jumber 1	Township Number T 7 S	Range Number R G E W	
Distance and direction from nearest town or city street address of well if Global Positioning Systems (decimal degrees, min.							rees, min. of 4 digits)	
located within	city? FROM WESTMO	Latitude:						
2 WATER WELL OWNER: JODY REVES RR#, St. Address, Box # : 11425 WUFF ROAD				Longitude: Elevation:				
RR#, St. Addr	ess, Box # : 11425 4	UFF ROAD	1	Elevatioi Datum:	n:			
City, State, ZI	P Code : WESTMO	RELAND.4566	549	Datum. Data Col	lection N	Method:		
City, State, ZIP Code : WESTMORELAND, US 66549 Data Collection Method: 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL								
LOCATION								
WITH AN "X" IN Depth(s) Groundwater Encountered (1)								
SECTION BOX: WELL'S STATIC WATER LEVEL								
Est. Yield. 4.0 gpm: Well water was								
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 Inrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well								
Was a chemical/bacteriological sample submitted to Department? Yes; If yes, mo/day/yrs Sample was submitted								
S								
5 TYPE OF CAS	SING USED: 5 Wrought 3 RMP (SR) 6 Asbestos	Iron 8 Concre	ete tile	aelow)	CASINO	G JOINTS: Glued	Clamped	
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded								
Blank casing dian	eter 5 in. to 7.5	ft., Diameter	in	ı. to	ft.,	Diameter i	n. toft.	
Casing height above land surface								
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)								
From								
GRAVEL PACK INTERVALS: From								
From								
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other								
Grout Intervals: From								
1 Septic tan	•) Livesto	ck nens	13 Ins	ecticide Storage	16 Other (specify	
2 Sewer lines 5 Cess pool 8 Sewage I				Fuel storage 14 Abandoned water well below)				
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well								
	11? NONE PA							
FROM TO	LITHOLOGIC	CLOG	FROM	TO	1 1 1 1	PLUGGING INTE	RVALS	
0 15	LIMESTONE C S.	INIK	93	97 102		ESTONE AY SHALE		
26 70	CRAY SHALE	W TUL	-41	702	3 10	YI SH HU		
30 38	YELLIW SHALE							
38 56	GRAY SUALE							
56 68	RED SHALE							
30 38 38 56 56 68 68 76 76 85	LIMESTONE							
76 85 85 86	GRBY SHALE CAVERN							
85 86	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)								
Kansas Water Well Contractor's License No								
	se typewriter or ball point pen. <u>PLEA</u>	ISE PRESS FIRMLY and PR	INT clearly	(Signatur y. Please fi	ll in blanks	, underline or circle the con	rrect answers. Send ton	
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.								