				R WELL RECO	ORD Form	WWC-5	KSA 82a	a-1212 P/	UGGING	REPORT
→	1 11	JER WELL:	Fraction	_		Secti	on Number		ip Number	Range Number
		erso iu		NE 1/4		1/4	5	<u></u> ⊤ δ	S	R 19 E/W
Distance a	nd direction	from nearest too	wn or city street	ddress of well 2 CAST	if located with of	in city?	RTONU	ille		
WATER	R WELL OV	VNER:	4			700	,,,,,,,,			MM / MA /
RR#, St. A	Address, Bo	×# : RRH	1 Box 19	8A				Board	of Agriculture, D	Division of Water Resource
City, State	, ZIP Code	: ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	RTONUIL	e Ms	66060			Applio	ation Number:	
LOCATE AN "X"	WELL'S I	OCATION WITH								
. Г		N *!	WELL'S STATION	water Encounte WATER LEVE	ered 1 L 7.5	ft. bel	ow land su	2		11-2-94
I I	1	1 ' 1								mping gpi
-	- NW	NE								mping gpi
<u>'</u> .	-	1 : 1								
[₽] w ├	i	£	Bore Hole Diameter							
-	i	i		3 Feedle					•	Other (Specify below)
-	- SW	SE	2 Irrigation	4 Indust						
	!	1 ! 1								mo/day/yr sample was si
L			mitted	bacteriologicals	sample submi	iled to Det		ter Well Disin		No X
TYPE	E DI ANK	CASING USED:	mitted	5 Wrought ire		Constat				Clamped
1 Ste		3 RMP (S	D)	6 Asbestos-C						ed
2 PV		4 ABS	Π)		zement :	Other (s	pecify belov	N)		ded
				7 Fiberglass		SIM	J 	<u>e</u>	i nrea	aea
				.in., weight)
		R PERFORATIO				7 PVC			Asbestos-ceme	
1 Ste		3 Stainles		5 Fiberglass			(SR)		, , , , ,	<i>NH</i>
2 Bra		4 Galvaniz		6 Concrete ti		9 ABS			None used (ope	•
		RATION OPENIN			5 Gauzed wra	apped		8 Saw cut		11 None (open hole)
1 Co	ntinuous slo	ot 3 M	lill slot		6 Wire wrapp	ed		9 Drilled ho		
2 Lou	uvered shut	ter 4 K	ey punched		7 Torch cut					(1
SCREEN-F	PERFORAT	ED INTERVALS:)
)
G	RAVEL PA	CK INTERVALS:	From		ft. to		ft., Fro	m	ft. to)
			From		ft. to		ft., Fro	m	ft. to)
GROUT	MATERIA	L: 1 Neat	cement (2 Cement grou	it>	3 Bentoni	te 4	Other		
Grout Inter	vals: Fro	m <i></i>	. ft. to . //.	ft., From	1	ft. to		ft., From	m <i></i>	. ft. to
What is the	e nearest s	ource of possible	contamination:				10 Lives	tock pens	14 At	andoned water well
1 Se _l	ptic tank	4 Later	al lines	7 Pit p	orivy		11 Fuel	storage	15 Oi	l well/Gas well
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage								16 Ot	her (specify below)	
3 Wa	tertight sev	ver lines 6 Seep	age pit	9 Feed			13 Insec	ticide storage		
Direction fr	_		WEST		•		How ma			_
FROM	ТО		LITHOLOGIC		F	ROM	ТО		150 ft PLUGGING IN	ITERVALS
100	60	SAN	d c GRA	ve/						
60	7	C/A	ekt grow							
7	4	Ceme	ENT Grow	T						
			7							
		-								
	-									
T	-	L								
CONTR	ACTOR'S	OR LANDOWNER	R'S CERTIFICATI							er my jurisdiction and wa
		/year) / . / . 								wledge and belief. Kansa
Vater Well	Contractor	's License No		This V	Vater Well Re	cord was	completed	on (mo/day/yr)	1	0-94
nder the b	ousiness na	me of					by (signat	ture) Usas	new H.	Achrick
INSTRUC	CTIONS: Use ty	pewriter or ball point	pen. <u>PLEASE PRESS F</u>	IRMLY and PRINT	learly. Please fill	n blanks, und	derline or circle	the correct answ	ers. Send top three c	opies to Kansas Department
of Health	and Environn	nent, Bureau of Water,	Topeka, Kansas 6662	0-0001. Telephone:	913-296-5545. Se	nd one to W	ATER WELL OV	WNER and retain of	one for your records.	