WATE	R WELL	RECORD	Form WW	'C-5	Division of Wate	er Resources; App. No.		
		F WATER WELL:	Fraction SU 1/4 SW 1/4	54)4	Section Number	Township Number T / S	Range Number R 2 0 E/W	
County: ROOKS Sylva Sw 1/4 Sw					Global Positionin	g Systems (decimal de		
located within city?					Latitude:			
		-y.						
2 WATER WELL OWNER: The Standard Standard					Longitude:			
2 WATER WELL OWNER: John Steeples RR#, St. Address, Box # : 2260 5 Rd					Datum:			
City.	State, ZIP	Code : 2.	S Ma	_		N -41 - 4.		
		TAC A DEPOSIT OF	COMPLETED WELL	/ 2	Data Collection	Method:		
	ATE WEL	L'S 4 DEPTH OF C	COMPLETED WELL.	<i>5</i>	π	•		
LOCATION NUMBER AN (SYPER) Part (2) Considerate Francisco (1) 2/ (2) (2) (2)								
	WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered (1)							
SECTION BOX: WELL'S STATIC WATER LEVEL							// y1	
	Est. Yield. 20gpm: 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 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)								
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								
S								
F TX/DE		NC ICED. 6 W.		4:1-	CACINI	C IODITC. Cl1	Clamad	
		NG USED: 5 Wro	bostos Coment 0 O	oncrete tile	CASIN	G JOINTS: Glued		
1		3 RMP (SR) 6 Ast 4 ABS 7 Fib	bestos-Cement 9 Of	mer (specify	below)	weided		
		tor c in to	ergiass		in to A	Threaded	in to ft	
Blank casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface in., & in., Weight in., Weight in., Weight in., Wall thickness or guage No. SDR. 2.4.								
		NOR PERFORATION			.105./1t. Wall till	ickliess of guage 140.	JUJA	
1	Steel	3 Stainless Steel		9 /	ARS	11 Other (Specify)		
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)								
		FORATION OPENING		(510)		12 110110 about (open		
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 <u>8 Saw Cut</u> 10 Other (specify)								
SCREEN-PERFORATED INTERVALS: From								
From								
GRAVEL PACK INTERVALS: From.: 5 ft. to								
From								
1		CRIAL: 1 Neat cemer	nt 2 Cement grout 3	Bentonite	4 Other	o w		
Grout Intervals: From								
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)								
5		-					below)	
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well Direction from well?								
FROM	TO		LOGIC LOG	FROM	1 TO	PLUGGING INT	TERVAIS	
		Linoi	20010 1000	TRON	10	1 0000000 1141	LIK T FILLS	
C	2	1000						
	28	SAND FIR			- 	RECEN		
28	48	SAKU FIM	E TO MEDIU	127				
48	49	Lunes ITALE				JUL 25	2008	
4.9	5-3	34HILE						
	-		•			BUREAU OF	WATER	
-								
	 							
7 CONTRACTOR'S OR LANDOWNED'S CERTIFICATION. This works well was (1) constructed (2) constructed (2) classed								
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my invisidation and was completed on (mo/day/year) 7/2 (10%) and this record is true to the best of my knowledge and belief								
under my jurisdiction and was completed on (mo/day/year)								
under the business name of Alount 1977 F1 WATER (1)4) by (signature)								
	A history	name of 2/		, , , , , , ,	vi (cionotire)			
INSTRU	e business	name of Alana or hall point nor	PLEASE PRESS FIRMIVO	nd PRINT clea	y (signature)	s underline or circle the	correct answers Cond From	
INSTRUC	es to Kansas	e typewriter or ball point per Department of Health and En-	n. <u>PLEASE PRESS FIRMLY</u> a vironment, Bureau of Water, C	and <i>PRINT</i> clea Seology Section	arly. Please fill in blafil n, 1000 SW Jackson St.	ks, underline of circle the of Suite 420, Topeka, Kansa	s 66612-1367./TAlephone	
three copi 785-296-5	es to Kansas S 5522. Send	e typewriter or ball point per Department of Health and En-	DEASE PRESS FIRMLY a vironment, Bureau of Water, Co	and <i>PRINT</i> clea Seology Section	arly. Please fill in blafil n, 1000 SW Jackson St.	ks, underline of circle the of Suite 420, Topeka, Kansa	s 66612-1367./TAlephone	