Detartion of the property of t			WATER	R WELL RECORD	Form WWC				
WATER WELL OWNER. WATER STANDARD SERVER SERVER STANDARD SERVER			1 0	1/ /3 1/		10	ه ز	i i	Range Number
WATER WELL DOWER THE ST. Address. Box # Control of St. St. Development of St. Develop				W X /) T /O	s	3 EO
WATER WELL OWNER Prince Application Number	Distance and dire					•			
BRIE ST Address, Box # 1994 COCAT WELLS LOCATION WITH DEPTH OF COMPLETED WELL 115	J				1 / A.S.				1,200,1
Construction Number: Construction		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		remen	•		Decided Action	. 	
LOCATE WELL SLOCATION WITH Depth of Colubrate Decumered 1.5		W 7 F							on of Water Hesource
WELL STATIC WATER LEVEL . 30 .ft below land surface measured on modalyy # 3 - 9 .7	City, State, ZIP C	ode : Aq	10, KS. 47"	414	111				
WELL STATIC WATER LEVEL . 30 .ft below land surface measured on modalyy # 3 - 9 .7	LOCATE WELL	'S LOCATION WITH	DEPTH OF CO	OMPLETED WELL	<i>!!!</i> ३	ft. ELEV	ATION:///./	:	
Pump test data: Well water was #5. ft. after 27 hours pumping 20 feat valled 52 ft app will water was ft. after hours pumping 20 feat valled 52 ft app will water was ft. after hours pumping 20 ft. after hours pumping 30 ft. and 10 ft. after hours pumping 30 ft. and 10 ft. after	AN A IN OLO	N BOX:							
Est velds 50 7 gpm. Well water was to and the second of th	₹ !								
Est. Yeld 32 gm. Well water was the after hours pumping in to .	Nw	NP44							
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Domestic 3 Feedor 6 Oil field water supply 9 Devatering 12 Other (Specify Delow Was a chemical bacteriological sample submitted to Department Maintend	<u>•</u>		Bore Hole Diame	ter / 0 in. to .			and	in. to	
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well ASSALE () In State 1 Yes, moday's sample with mitted mitted method water well Dismited the particular of the particular o	ž W į	! ! !	WELL WATER TO	O BE USED AS:	5 Public wa	ter supply	8 Air conditioning	11 Injec	tion well
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Blank casing diameter 5 in to 70 ft. Dia in to 1. Dia in to 2. Diameter 5 in to 70 ft. Dia in to 1. Dia in to 2. Diameter 5 in to 50 ft. Wall thickness or gauge No. SDR. 26 TYPE OF SCREEN OR PERFORATION MATERIAL: 1. Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify). 2. Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify). 3 Continuous stot 9 Mill stot 6 Wire wrapped 9 Drilled holes 3 Continuous stot 9 Mill stot 6 Wire wrapped 9 Drilled holes 3 Continuous stot 10 Mill stot 6 Wire wrapped 9 Drilled holes 3 Continuous stot 11 None (open hole) 3 Continuous stot 10 Mill stot 6 Wire wrapped 9 Drilled holes 3 Continuous stot 10 Mill stot 10 Other (specify). 4 Key punched 7 Torch out 10 Other (specify). 5 CREEN-PERFORATED INTERVALS: From 1/5 ft. to 10 ft. From ft. ft. From ft. to 10 ft. From ft. ft. ft. From ft. ft. From ft. ft. From ft. ft. From ft. ft. ft. From ft. ft. ft. ft. ft. From ft.	(2)PVC		_	7 Fiberglass					
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under the hydrogen name of Mariles To V. I. A. 1/1			11 608	This Water W	ell Record w	as completed	on (mo/day/yr)	10-17	,
under the business name of 77/164 Scr (r) 11/1/12 by (signature)	under the busines	name of $\frac{7}{7}$	low Jack	of Drillias		by (signa	iture)	1. Wo	addell
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Hease fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Departme of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.	INSTRUCTIONS: U	se typewriter or ball point p	pen. PLEASE PRESS FIF	RMLY and PRINT clearly. Mea	ase fill in blanks	, underline or circl	e the correct answers. Send t	op three copies	to Kansas Department