		W	ATER WELL RE	CORD	Form WWC-5	KSA 82a	-1212 ID N	No			
		ATER WELL:	Fraction	NINK!		Se	ction Number		Number	Range Number	
County:			NW 1/4		<del></del>	1/4	32	<u> </u>	s	R 26 EW	
		n from nearest to astle Rock Ro									
2 WATE	R WELL O	WNER: Graha	ms 66	STREET, THE PROPERTY OF	THE RESERVE OF THE SAME PARTY AND ASSESSMENT OF THE SAME PARTY ASSESSMENT					THE RESIDENCE AND PROPERTY OF THE PROPERTY OF	
City, State	Address, Bo e, ZIP Code	: Ouinte	tate 70 & Ca er, KS 6775	2				Applicati	on Number:	Division of Water Resources	
3 LOCAT	E WELL'S L	OCATION WITH	4 DEPTH OF	COMPLE	TED WELL 89	.9	ft. ELEV	ATION: 2659		A47A74777744A4777788777847878787777447877774	
	IN SECTIO	N BOX:	Depth(s) Grou	ndwater	Encountered	1 74.96	f	t. 2	ft. 3	3 ft.	
x			WELL'S STAT	IC WATE	R LEVEL /4.90		low land surfa	ce measured on	mo/day/yr!	06-13-2006	
	1	1	Est. Yield .5	imp test	uata: Well wat	er was er was	Π.	after	nours	pumpinggpm pumpinggpm	
- NW NE - Est. Yield 5								Injection well			
	1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering OZ-72 Other (Specify below)										
W E 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well 02.7											
	- SW SE Was a chemical/hacteriological sample submitted to Department? Ves No X - If yes mol/tay/yrs sample was sub-										
	17 143 d chemical bacteriological sample submitted to bepartments les 16 yes, more daylyts sample wa									mo/day/yrs sample was sub- No x	
Timed Yatel Well Distributed: 155 140 X											
El TVOS	OE BLANK	CASING USED:		E Me	roht iron	8 Conci	enta tila	CASING	IOINTO, Ch.	ed Clamped	
1 Ste		. CASING USED. 3 RMP (S			ught iron estos-Cement		(specify below			deddiampedded	
2 PV	C	4 ABS	·	7 Fibe	erglass		·	•	Thre	eaded	
Blank cas	sing diamete	r .2	in. to	39.9	ft., Dia .	*, *************	in. to	ft.,	Dia	ft.	
		land surface0.2		in.,	weight .0.70				_	ge No. sch 40	
		OR PERFORATION		e en		7 P'	/C MP (SR)		Asbestos-Cer		
1 Str 2 Bri		3 Stainles 4 Galvani.			erglass icrete tile	9 AI			Vone used (c	y) ppen hole)	
		PRATION OPENII			5 Gus	azed wrapped		8 Saw cut	,	11 None (open hole)	
	intinuous sic		Mill slot			e wrapped		9 Drilled hole		Tr Hone (open hole)	
	uvered shut		Key punched		7 Toro	ch cut		10 Other (spe	cify)	ft.	
SCREEN-PERFORATED INTERVALS: From 87.9 ft. to 89.9 ft., From ft. to									oft.		
	0041/51 5	***** ** (*******************	From		ft. to		ft., Fron	] -	ft. 1	oft. oft.	
	GHAVEL	ACK INTERVALS	ร: From From		ft. to		ft., Fron	ን ነ		oft.	
	••••	***									
	UT MATER		at cement	2 C	ement grout	3 Ber				******************	
				*******	ft., From	ft.				ft. to	
		ource of possible					10 Livestock pens			Abandoned water well	
	eptic tank		ral lines	• •			11 Fuel storage 12 Fertilizer storage			Oil well/Gas well	
	ewer lines	5 Ces ver lines 6 See	•					12 Fertilizer storage 16 Other (specify below) 13 Insecticide storage			
	from well?		page pit	o r occyaro				How many feet? 150			
FROM	ТО		LITHOLOGI	C LOG		FROM	то		PLUGGING II	NTERVALS	
0	1	topsoil and fi	·								
1	17	Silt		***************************************			İ 🗆				
17	23	Clayey Silt						TO THE RESIDENCE OF THE PROPERTY OF THE PROPER			
23	55	Sand								20 - 100 - 1	
55	80	Sandstone									
80	89.9	Sand									
SCHLARCH MONTH SELECTIVATION OF THE MEMORIES			Scant whitelest a Missilton half black of contact to Missilton		res Armina -		<u> </u>				
			and a second rectal materials are consistently to second rectal from the second rectal and the second rectal a				ļ	cade actes dad are and a disconnection accounts an add referred from any reflective determination dem	# - ####\$\# -#\$ 0 40 00 00 00 00 00 00 00 00 00 00 00 0	THE STATE OF THE S	
							-				
***************************************											
# specigoner *4 s to - urbanascerespecificacoda						1					
7 CONT	RACTOR'S	OR LANDOWNE	B'S CERTIFICA	TION: T	his water well i	was (T) const	ructed (2) rec	constructed or /3	) nlunned ur	nder my jurisdiction and was	
completed	on (mo/day	<sub>(year)</sub> 06-13-06								knowledge and belief. Kansas	
Water We	II Contractor	's Licence No 55:	4	**********	This Wate			ed on (mo/day/yr		f ff	
under the	business na	me of Wo	ofter Pump & '	Well, In	2.		by.	(signature)	hu/ ///	WIEL III	
INSTRU	CTIONS: Use ty	pawriter or ball point pe	en. <i>PLEASE PRESS</i>	FIBMLY and	PRINT clearly, Plea	ise fill in blanks, ur	define or circle th	e correct answers. Se	nd tot three copie	to Kansas Department of Health	
and Envi	ronment, Bureau	of Water, Geology Se	ection, 1000 SW Jack	son St., Sui	e 420, Topeka, Kans	sas 66612-1367. To	elephone 785-296-	5522. Send one to WA	YER WELL OW	IER and retain one for your	