		WATE	R WELL RECORD	Form WWC	<u>-5 KSA 82</u>	a-1212		\/ C	7BW3
LOCATION OF WA	TER WELL:	Fraction	-	-	ection Numbe		Number	Range N	lumber
County: Logan		SE/4	SE _{/4}	SE _{1/4}	3	т 11	<u> </u>	R 32	XXM
Distance and direction	i from nearest tow	or city street ac	ddress of well if loo	cated within city?	?				
WATER WELL OW RR#, St. Address, Bo City, State, ZIP Code	x # : Hwy 40 : Oakley) & Smokey] , KS 67748	Hill Rd			Board of Application	n Number:	Division of Water	
LOCATE WELL'S L AN "X" IN SECTIO									
NW	N	WELL'S STATIC Pump Est. Yield Bore Hole Diame WELL WATER T 1 Domestic 2 Irrigation Was a chemical/b	water level of test data: Well water well water was spin well water was spin and spi	N/A ft. water was water was to 84 5 Public wa 6 Oil field w 7 Lawn and	below land successful fit. ft. ft. ft., ft., ter supply vater supply garden only Department?	2. urface measured of after and Z 8 Air conditioning 9 Dewatering Monitoring we ges	n mo/day/yr hours pu hours pu number in 12 11 12 11 15 15 16 17 17 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19	mping to	gpn gpn ft
	*	mitted				ater Well Disinfect		No 3	
TYPE OF BLANK			5 Wrought iron		crete tile			d Clam	•
1 Steel	3 RMP (SF	٦)	6 Asbestos-Ceme		r (specify belo	,		edbe	
PVC PVC Blank casing diameter	4 ABS . 1.9/2/2,375	/i	7 Fiberglass					ided 4TPI.	
Blank casing diameter Casing height above l									
			in., weignt						
	YPE OF SCREEN OR PERFORATION MATERIAL:			X PVC		10 Asbestos-cement 11 Other (specify)			
1 Steel	3 Stainless		5 Fiberglass	9 A	MP (SR)				
2 Brass	4 Galvanizo		6 Concrete tile		.00		ne used (op	en noie) 11 None (ope	on hole)
COPEN OR REDEO			E C					I I NOTE TODE	
SCREEN OR PERFO 1 Continuous sk 2 Louvered shut	ot X Mi	GS ARE: ill slot ey punched	6 W	iauzed wrapped Vire wrapped orch cut	<u>.</u>	8 Saw cut 9 Drilled holes 10 Other (speci	fy)		
1 Continuous slo 2 Louvered shut SCREEN-PERFORAT	ot X Mi	ill slot ey punched From. 26	6 W	vire wrapped orch cut to 2997, for the cut to 2997, for the cut to 2997, for the cut to	ft., Fro	9 Drilled holes 10 Other (speciform	fy)	o	
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Under the business name of COranco, Inc. by (signature) by (signature)

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department 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.