									MW	-19
		W	ATER WELL REG	CORD Form WWC-	E KSV 8	32a-1212 II	No 003	32789	7	•
1 LOCATIO	ON OF WA		Fraction	JOHD TOIN WWC-		ction Number	7 110.	ip Number	Range N	lumber
County:	090	. 71	JE SE 14	NE 14 5E	= 1/4	3	Т.	// s	R 30	Z, ₽Ø
Distance ar			town or city stree	t address of well if loca				٨		~ _
I	-N C	akleu	K5, 5	200 Stree	t are	e Fre	eeman		2	
WATER	WELL OW	NER:	Breat W.	estern Tr Front Street	e/40	astal	Wart:	2526	-	
RR#, St. Ad	ddress, Bo	x#: 🛒 🌂	19 East	Front Street	- 7 - 00	- 1-	Board o	f Agriculture, I	Division of Wa	ter Resources
City, State,	ZIP Code		Oaklen K				Applicat	tion Number:		
LOCATE	WELL'S LC	CATION WITH	4 DEPTH OF	COMPLETED WELL.	135	ft. ELE\	VATION: d	915,5	9	
AN "X" II	N SECTIO	N BOX:				<u></u>	ft. 2	ft. 3		ft.
	<u> </u>		WELL'S STATIC	dwater Encountered WATER LEVEL J. 191	1.7 ft. bel	ow larid surfa	ace measured or	mo/day/yr	7-16-0	: 4
†				np test data: Well wate						
	NW	NE	Est. Yield	gpm: Well water	er was	ft	. after	hours	pumping	gpm
			Bore Hole Diam	neter 8 in. to	0		., and		in. to	ft.
₩ W		E	WELL WATER	TO BE USED AS: 5 I	Public water	supply	8 Air condition	ing 11 i	njection well	
7		X	1 Domestic			er supply	_		Other (Specify	below)
	sw -	SE	2 Irrigation	4 Industrial 7 I	Domestic (lav	vn & garden/	10 Monitoring w	/ell // //. ¼	V: 1.4	
↓	!	! !	Mas a shamisal	bacteriological sample su	bmittad to Da	onadmant? V	On No	> . If yes .	mo/day/yra say	mala was sub
<u> </u>	<u> </u>		mitted	bacteriological sample su	ibitilitied to De	•	ter Well Disinfe		no/day/yrs sai	No XI
TYPE OF	F BLANK (CASING USED:		5 Wrought iron	8 Conci			JOINTS: Glu	ed Clai	
1 Steel		3 RMP (S		6 Asbestos-Cement		(specify be			ded	
2 PVC)	4 ABS	,	7 Fiberglass			· · · · · · · · · · · · · · · · · · ·	. Thre	eaded. XI	
	/		in. to	O ft., Dia						
		land surface	_ ^ _ /	n., weight						
-	•		TION MATERIAL	-	(7 PV	-		Asbestos-cen		
1 Steel		3 Stainles		5 Fiberglass		MP (SR)		Other (specify		
2 Brass		4 Galvani		6 Concrete tile	9 AB			None used (o		
SCREEN (OR PERF	DRATION OPE			ed wrapped	i	8 Saw cut	(11 None (o	pen hole)
	nuous slot	(3 N	fill slot O. C	20 6 Wire	wrapped		9 Drilled ho	oles	. , , , , , , , , , , , , , , , , , , ,	, , , , , ,
2 Louve	ered shutte	er 4 K	ey punched	7 Torch				ecify)		
SCREEN-I	PERFORA	TED INTERVA	LS: From	0.5 ft. to	.13.5.	ft., Fro	om	ft. 1	to	ft.
				ft. to						
(GRAVEL P	ACK INTERVA	LS: From	. ສ ft. to	156	ft., Fro	om	ft. 1	to	ft.
				> ft. to	_			/ /- ~	10	π
	MATERIA		_	②cement grout	3 Bento		10ther . See?		-/3-	
Grout Inte	rvals: Fro	om	ft. to .♣1.0		. Ø ft	. to	7 ft., Fron	n . <i>l.Q.O</i>	ft. to <i>l.D</i>	. 2. ft.
What is the	e nearest s	source of possi	ble contamination	ո:		10 Live	estock pens	14 A	Abandoned wa	ter well
1 Seption	c tank	4 Late	ral lines	7 Pit privy		11 Fue	el storage	15 0	Dil well/Gas we	ell
2 Sewe	r lines	5 Cess	s pool	8 Sewage	lagoon	12 Fer	tilizer storage	16 (Other (specify	below)
3 Wate	rtight sewe	er lines 6 Seep	oage pit	9 Feedyar	ď	13 Inse	ecticide storage			
Direction for	rom well?					How m	nany feet?			
FROM	TO		LITHOLOGIC LO	OG,	FROM	ТО		PLUGGING II	NTERVALS	
0	2.0	SanduSilt	brn tine	to coarse sand	89.0	103.0	Sand med +	prineta coa	rse wiar	avel poor
	-	Sandi SI+.		rwa very fine to			sorted rou	-, 111		o odor
		0 1	no oder	7 3 /*	103.0	1/0.00	(Van light	brown, so	7 - 11	o med sa
22.0	34,0		,	white caliche sand		1,5,00	and Visit	Californ	,	oder
		Time to me	111	odor	11110	132.0	Sand med	10110111		soorly so
34.0	36,0	4		no ader	1	1 24 (0	-24 A	1		ador.
	53.D	Succession 100	1	Coarse grains,	132.0	135.0	Mey It 1		ne cal	
30.0	JJ,U	111 1/ 14	, , ,	0 1	150	ti) Ji U	notodo			1
53.0	59.0	10/1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , , , , 			TW VO DUD		OEN /E!	`
23,0	J,U	Caliche	,	UMA, SKA SOWE					CEIVE	J
59.0	65.0	2 1 1	no odor	0- 1-1	-					
8710	00.0	1	to very coar					AU	3 0 200 4	4
650	QQA	Subrounde		or no odor	-					
65.0	89.0	1, 0,	ran, some fir	ue to med sand,	-			BURE/	AU OF WA	TER
ZI CONTE	OTODIO O	no oder	-DIO OFFITIO	TON THE						
			HS CERTIFICAT	ION: This water well w						
completed of			19	• • • • • • • • • • • • • • • • • • • •			ord is true to the	(, , , ,		belief. Kansas
		's Licence No.	·· *·· 	This Water We	ell Record w	as complete	d on (mo/day/yr)	a:18.C	ነሟ	
ınder the bı	usiness na	year I to em	Ace Dun	disall		by ((signature)	Doubter	Il~	
INSTRUCTION	ONS: Use type	writer or ball point pe	n. PLEASE PRESS P	RMLYand PRINT clearly. Please	fill in blanks, und	lerline or circle the	e correct answers. Ser	nd top three copies t	o Kansas Departme	ent of Health and

Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.