WATER WELL RECORD		Form WWC-	5	Division	of Water	Resources; App. No.	
1 LOCATION OF WATER WELL: County:		Fraction 4SE	1/4	Section Number Township Num T S			Range Number R 2 E/W
Distance and direction	or city street address of we			sitioning	Systems (decimal degr	rees, min. of 4 digits)	
Jocated within city?  JUST 45	12 South	06 Quinter	<b>⁻</b>	Latitude: Longitude	e:		
2 WATER WELL OWNER: RR#, St. Address, Box # : 200		Castle Lock Rd	. I	Elevation: Datum:			
City, State, ZIP Code	Quint	1.KS 67752			ection N	Method:	<del></del>
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL							
LOCATION			O <sub>1</sub>				
WITH AN "X" IN	Depth(s) Groundwater Encountered (1)						
SECTION BOX:	WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr						
	Est. Yield. D. gpm: Well water was ft. after hours pumping.						
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well							
W							`
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well							
SW   SE   Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs							
Sample was submitted							
s							
5 TYPE OF CASING U	JSED: 5 Wrou	ight Iron 8 Conc	rete tile		CASINO	JOINTS: Glued	Clamped
	P (SR) 6 Asbe	stos-Cement 9 Other	(specify b	oelow)		Welded	
PVC 4 ABS 7 Fiberglass Threaded							
Blank casing diameter							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel 3 Stainless Steel 5 Fiberglass TPVC 9 ABS 11 Other (Specify)							
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE:							
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 8 Saw Cut 10 Other (specify)							
From							
GRAVEL PACK INTERVALS: From							
From							
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Sentonite 4 Other							
Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft., From ft. to ft.							
What is the nearest source of possible contamination:							
						16 Other (specify below)	
3 Watertight sewer	-		2 Fertilize			l well/gas well	ociow)
Direction from well?							
FROM TO	LITHOLO	OGIC LOG	FROM	TO		PLUGGING INT	ERVALS
<u> </u>	2011		60	00	606		
17 25 31	MY car	<b>}</b>	81	77	1000	rse sam	A VRV
20 21 10	THE YOCK		72	45	yeu	w clay pra	rd Pock
21 36 50	ind rock						
36 42 ax	ay clay						
42 47 50	und	•					
47 75 Sa	ndy clau	Υ					
75 84 5	and			-			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION/ This water well was (1) constructed, (2) reconstructed, or (3) plugged							
under my jurisdiction and was completed on (mg/day/year) 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 TOUG PUMD by (signature)  INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PIESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the consect answers. Send top							
INSTRUCTIONS: Use types	vriter or ball point pen.	PLEASE PILESS FIRMLY and Fronment, Bureau of Water Geolo	PRINT clearl	y. Please fi 1000 SW Ia	ll in blank ckson St	s, underline or circle the co Suite 420. Toneka Kansas	66612-1367. Telephone
three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at							
http://www.kdheks.gov/waterwell/index.html.							