IDCATION OF MATER WELL Figures Service Number Township N		_		WATER W	ELL RECORD	Form WWC	-5 KSA 8	32a-1212		
MATER WELL OWNER: WATER WELL STATIO WELL STATIO WELL OWNER: WATER WELL OWNER:	4	11		Fraction	11/2)					
WATER WELL OWNER WER, St. Address Box # WER, St. Address Box # WELLS LICATION TON AN "X IN SECTION BOX: WELLS LICATION TON AN "X IN SECTION BOX: WELLS STATIO WATER LEVEL. WELL WATER TO BE LISED AS: See Note Described to See Note of Section of Sec				or city street addre	ess of well if loc	ated within city		1 /2	<u> </u>	I R Z 8 E/W
SR4, Stan Address, Box # Standard Agriculture, Delison of Water Resources # Standard Standard Agriculture, Delison Number						sinfiel				
Application Number: LOCATE WELLS LOCATION WITH DEPTH OF COMPLETED WELL 1/2 It. BLEVATION: AN "X" IN SECTION BOX: Depth of Complete D	J		7(6)	~Ochans	Je.	1		5		D
LOCATE WELL'S LOCATION WITH AN X IN SECTION 90X: WELL'S STATIC WATER LEVEL WELL'S TATIC WATER LEVEL WELL'S STATIC WATER LEVEL WELL'S TATIC WATER LEVEL WELL'S STATIC WATER LEVEL WELL'S STATIC WATER LEVEL WELL'S STATIC WATER LEVEL WELL'S STATIC WATER LEVEL	•	•		aintick	1/5				•	Division of Water Hesources
Disphi(s) Groundwater Encoursered 1. 6. ft. 2. tt. below mits surface measured on modayly 4. ft. 7. 2. tt. below mits surface measured on modayly 4. ft. 9. below mits surface measured on modayly 4. ft. 9. below mits surface measured on modayly 4. ft. 9. tt. ft. ft. ft. ft. ft. ft. ft. ft. ft	LOCATI	E WELL'S L	OCATION WITH 4		PLETED WELL.	112	ft. ELE			
Pump leat data. Well water was fit after hours pumping gom well was a chemical bacteriological sample submitted to Department? Ves hours pumping 12 Other (Specify below) was a chemical bacteriological sample submitted to Department? Ves hours will have well was a chemical bacteriological sample submitted to Department? Ves hours will have well was a chemical bacteriological sample submitted to Department? Ves hours will have well was submitted to Department? Ves hours will have well was submitted to Department? Ves hours will have well was submitted to Department? Ves hours will have well was submitted to Department? Ves hours will have well was submitted to Department? Ves hours will have well was submitted to Department? Ves hours well was submitted	AN "X"	IN SECTIO	N BOX:	- Depth(s) Groundwate	er Encountered	1 . (6. –	\$f	t. 2	ft. 3) _. _. <u></u>
Bet. Vield ggm. Well water was the after mouse pumping ggm. Well water was the analysis of the control of the c	Ī .	11								
Bore Hole Diameter	-	-1 NW	NE							
Well, WATER TO BE USED AS: S Public water supply B Air conditioning 11 Injection well was compensed on more and process of the		!			-7-1	,,,			-	
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well was a chemical/bacteriological sample submitted to Department? Yes. No. X.: If yes, modayry sample was submitted Was a Chemical/bacteriological sample submitted to Department? Yes. No. X.: If yes, modayry sample was submitted Was a Chemical/bacteriological sample submitted to Department? Yes. No. X.: If yes, modayry sample was submitted Was a Chemical Was	* w -	ļ.								
Was a chemical/bacteriological sample submitted to Department? Yes	ī -	. – SW – –	SE	•						Other (Specify below)
TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS Glued X. Clamped.		Ï		•			•			
TYPE OF BLANK CASING USED: 1 Stool 3 RMP (SR) 5 Asbestos-Cement 9 Other (specify below) Welded Triesded. 1 Threaded. 1 Subject threaded. 1 Subject threaded. 1 Threaded. 1 Threaded. 1 Threaded. 1 Subject threaded. 1 Subject threaded. 1 Threaded.	<u>ł</u> L				eriologicai samp	ie submitted to				V
Fiberglass Threaded Threade	TYPE (OF BLANK	· · · · · · · · · · · · · · · · · · ·		Wrought iron	8 Cond				
Sank Casing diameter in. to	_		3 RMP (SR)) 6	Asbestos-Ceme	nt 9 Othe	er (specify be	elow)	Weld	ed
This Wall thickness or gauge No. 214. PyPE OF SCREEN OR PERFORATION MATERIAL:					•					
PYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) 2 Brass 6 RMP (SR) 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 9 Spiriled holes 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch out 10 Other (specify) 3 CREEN-PERFORATED INTERVALS: From 1.0.2. ft. to 11.2. ft., From ft. to ft. From 1.0.2. ft. to 11.2. ft., From ft. to ft. GRAVEL PACK INTERVALS: From 1.0.2. ft. to 11.2. ft., From ft. to ft. From 1.1.0. ft. from ft. to ft. GROUT MATERIAL: Obset cement 2 Cement grout 3 Bentonite 4 Other continuous source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well 12 Sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 15 Oil well/Gas well 16 Oil of Seepage pit 9 Feedyard 13 Insecticide storage 16 Oigne (specify below) 17 Oil		_								- 1 · 1
1 Steel 3 Stainless steel 5 Fiberglass 9 RMP (SR) 11 Other (specify). 2 Brass 4 Galvanized steel 6 Concrete tille 9 ABS 12 None used (open hole) 5 CREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 9 Drilled holes 12 Countries state 14 Key punched 7 Torch cut 10 Other (specify). 2 Countries state 14 Key punched 7 Torch cut 10 Other (specify). 3 CREEN-PERFORATED INTERVALS: From 1.0.2. ft. to 11.2. ft. From ft. to ft. From ft. ft. From ft. to ft. From ft. From ft. ft. Fro	_	•			weight					
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 11 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (morday/year) CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (morday/year) CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (morday/year) CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (morday/year) CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well Record was completed on (morday/year) CONTRACTOR'S Use beyowifter or ball point pen, PLEASE PRESS FRMILT and PRINT clearly. Flease fill in blanks, decletine for circle the correct answers. Send down.					Fiberglass					
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From ft. to ft. From ft. to ft			•		. ^	^	/ftF	• • •	•	
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Arout Intervals: From ft. to ft. From f			\sim							
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