			WATE	ER WELL RECORD	Form WWC-5	KSA 82a-	1212			
1 LOCATION OF WATER W County: (1) R / A C C	VELL	Fract		NOV 1/4 NO	5 1	on Number	Township N		Range Number R 39 E/W	
Distance and direction from	nearest to	wn or ci	tv? // N	OUME NOW	Street addre	•	located within city		H J / L/W	
	F 51	HAON.	<i>SPRIN</i>	gs, KANS.						
2 WATER WELL OWNER:	Henry	Funk		,						
RR#, St. Address, Box # :	1 .	4411	a (7 1 0011	0.1	2	Board of A		Division of Water Resources	
City, State, ZIP Code :	ARA	PHHO	2	Olokko		202		***************************************	•	
3 DEPTH OF COMPLETE	D WELL.								. in. to ft.	
Well Water to be used as:	_		lic water	* * *	8 Air conditi	_		jection well	to a to a N	
1 Demostic 3 Feedlot				r supply rden only\		=	12 (ther (Specify	y below)	
2 Irrigation 4 Industri Well's static water level	a 						onth 23		av & voar	
Pump Test Data									gpm	
Est. Yield 3			iter was		er		hours pumping		gpm	
4 TYPE OF BLANK CASIN	NG USED:			5 Wrought iron	8 Concret	e tile	Casing .	Joints: Glued	I Clamped	
1 Steel	3 RMP (SR)			6 Asbestos-Cemen	t 9 Other (s	ther (specify below)		Welded		
2 -PVC	4 ABS			7 Fiberglass					Threaded	
Blank casing dia	نا <i>ک</i>	in. to	5	ft., Dia	j in. to) <i>.</i>	ft., Dia		. in. to ft.	
Casing height above land su										
TYPE OF SCREEN OR PE	RFORATION	TAM NC	ERIAL:		7	·	10 Asi	bestos-ceme	nt	
1 Steel	3 Stainless steel			_		(SR) 11 Oth		ner (specify)		
	4 Galvan	ized ste	el		9 ABS			one used (open hole)		
Screen or Perforation Openi	•			5 Gauzed wrapped			8 Saw cut		11 None (open hole)	
1 Continuous slot	_	Mill slot			e wrapped		9 Drilled holes			
2 Louvered shutter					ch cut			fy) _.		
Screen-Perforated Intervals:										
Gravel Pack Intervals:				ft to						
Graver Pack Intervals.	From.				ft				#	
5 GROUT MATERIAL		cement	<u> </u>				Other	-		
Grouted Intervals: Frem Ce										
What is the nearest source of possible contamination:							-		14 Abandoned water well	
1 Septic tank	4 Cess pool			7 Sewage la	agoon	11 Fertilizer storage		15 Oil well/Gas well		
2 Sewer lines	5 See	5 Seepage pit		8 Feed yard	l	12 Insecticide storag			ther (specify below)	
3 Lateral lines	6 Pit privy			9 Livestock pens		13 Watertight sewer lines			UONE	
Direction from well										
Was a chemical/bacteriologi										
was submitted		.month .		day.	year: P	ump Installe	d? Yes		No	
If Yes: Pump Manufacturer's	s name. A	re mo	TOR	winds.	Model No		HP	• • • • • • • •	Volts	
Depth of Pump Intake						-				
Type of pump: //iNdmi	/ 1 Subm	ersible	DTIFICAT	2 Turbine	3 Jet			Reciprocatin		
completed on										
and this record is true to the									year	
This Water Well Record wa	e pest of t	nny know ed on	neuge and	geliei. Kansas wate	month Contractor	S License IV	day 8	~······	year under the business	
This Water Well Record wa	5 COMPIE	OIVA	OTI	10	by (signature)	Rola	l'el Luc		year under the busines:	
7 LOCATE WELL'S LOCA	TION	ROM	ТО	LITHOL	OGIC LOG	FROM	и то	L	ITHOLOGIC LOG	
WITH AN "X" IN SECT	ION	0	વ	Topsoil						
BOX:		3	13	Clay						
N	ı	3	34	Gravel						
 		4	44	Sandstone						
NW NE		4	50	Gravel						
w Kie	E 5	0	60	Scapstone						
- SW SE		0	76	Shale						
- 5 - 5 - 5 - 7										
<u> </u>	J			:						
1 Mile							-			
ELEVATION:			,,,							
Depth(s) Groundwater Enco									eet if needed)	
INSTRUCTIONS: Use typew copies to Kansas Departmen	writer or bant of Health	all point pand Fn	oen, <i>pleas</i> vironment	se <i>press firmly</i> and <i>PR</i> . Division of Environme	IIN / clearly. Pleas ent. Water Well Co	e till in blank ntractors. To:	s, underline or cir oeka. KS 66620-9	cie the corre Send one to V	ct answers. Send top three NATER WELL OWNER and	
retain one for your records.				,						