	WATE	ER WELL RECORD	Form WWC-5	KSA 82a-	·1212		
LOCATION OF WATER WELL: County: WUSSELL	Fraction		Sec	tion Number	Township Nu	mber 3 s	Range Number
Distance and direction from neares		address of well if located	d within city?			P -	
WATER WELL OWNER: C/7 IR#, St. Address, Box # : /3	3 YOEST 8	DTON BTH			-	•	Division of Water Resource
		S 67665	12		Application		
LOCATE WELL'S LOCATION WAN "X" IN SECTION BOX:	Depth(s) Ground	dwater Encountered 1	. <u></u>	ft. 2	1	ft. 3.	
NW NE	Pum Est. Yield	np test data: Well wate	er was	ft. af بندن	fter	hours pur	mping gpm mping gpm to
	WELL WATER	TO BE USED AS:	5 Public water	er supply	8 Air conditioning	11	Injection well
SW SE	1 Domestic 2 Irrigation	4 Industrial	7 Lawn and g	garden only 1	10 Monitoring well	····.	Other (Specify below)
, 1	Was a chemical/	bacteriological sample s	submitted to De	•	esNo ter Well Disinfected		mo/day/yr sample was sub No
TYPE OF BLANK CASING USE		5 Wrought iron	8 Concre				I Clamped
1 Steel 3 RMI	P (SR)	6 Asbestos-Cement	9 Other	(specify below	v)	Welde	ed
2 PVC 4 ARS		- 7 Fi berglass ft., Dia			ft., Dia		in. to ft.
Casing height above land surface. TYPE OF SCREEN OR PERFORA	. Ø			lbs./f	ft. Wall thickness o		o
	inless steel	5 Fiberglass		MP (SR)			
	vanized steel	6 Concrete tile	9 AB			e used (op	
CREEN OR PERFORATION OP			ed wrapped		8 Saw cut		11 None (open hole)
	3 Mill slot		wrapped		9 Drilled holes		
2 Louvered shutter	4 Key punched	5 7 Torch	1 (
SCREEN-PERFORATED INTERVA							o
GRAVEL PACK INTERVA							o
	From	ft. to		ft., Fron			
	leat cement	2 Cement grout	3 Bento				
		/	ft.				ft. to
What is the nearest source of poss	•	•		10 Livest			bandoned water well
·	Lateral lines Cess pool	7 Pit privy 8 Sewage lago	inon (storage zer storage		il well/Gas well ther (specify below)
3 Watertight sewer lines 6 S	•	9 Feedyard	_		zer storage ticide storage		
Direction from well?	CUIT	HINS	SITE	How mar	ny feet?	1,7	HIN
FROM TO	LITHOLOGIC		FROM	то	PLU	UGGING IN	TERVALS
O 12 SILT	Y SANDY	CLAY					
12 TD SAND	CARAVE	EL					
	LOJ CLA	Y LAYERS					
							`
WANTE OF THE PROPERTY OF THE P							,
CONTRACTOR'S OR LANDOW	VNER'S CERTIFICAT	19N: This water well w	/a (1) donstru	cted, (2) reco	nstructed, or (3) pl	lugged und	er my jurisdiction and wa
completed on (mo/day/year) Water Well Contractor's License N		11.19.2		and this recor	rd is true to the bes	st of my kno	owledge and belief. Kansa
Water Well Contractor's License Number the business name of	O. I.COS	This Water W	Vell Record wa	s completed of	on (mo/day/yr)	7/0	1./.Z

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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.