		WATER	WELL RECORD	Form WWC-5	KSA 82a-	1212		
1 LOCATION OF WATER WEL	L:	Fraction			tion Number	Township No	-	Range Number
County: PUSSELL		SE 14			<u>97</u>	<u> </u>	3 s	R /4 (W)
Distance and direction from nea	133 4	D. 877	<del>/</del>	within city?		5-	-10	
2 WATER WELL OWNER:	, , .	FULLS	SELL					
RR#, St. Address, Box # :	<del>~</del> -	DEST	8177			Board of A	griculture, l	Division of Water Resources
City, State, ZIP Code : 9		L, KS	67665			Application	Number:	
LOCATE WELL'S LOCATION AN "X" IN SECTION BOX:	N WITH 4 D	EPTH OF CO						
Depth(s) Groundwater Encountered 1,								
WELL'S STATIC WATER LEVEL/ ft. below land surface measured on mo/day/yr								
Pump test data: Well water was ft. after hours pumping ft. after hours pumping ft. after hours pumping								, •
	41 1		4 <del>5</del> 2	, _			•	toft.
* w   1   1	<u>-4</u> -4 €1			5 Public wate		8 Air conditioning		Injection well
-	I I	1 Domestic				9 Dewatering		Other (Specify below)
SW SE	1 1	2 Irrigation				0 Monitoring well		
1 1 1 1 1	1 1	•			_		, ,	, mo/day/yr sample was sub-
1 5	mitte		,			er Well Disinfecte		No L
5 TYPE OF BLANK CASING I	USED:		5 Wrought iron	8 Concre	ete tile	CASING JO	NTS: Glue	d Clamped
1 Steel 3 I	RMP (SR)		6 Asbestos-Cement	9 Other	(specify below	<i>ı</i> )	Weld	ed
2 PVC ) 4 /	ABS	,,	7 Fiberglass				Threa	aded
Blank casing diameter in. to								
Casing height above land surfacein., weight								
TYPE OF SCREEN OR PERFO				7 PV	- 1		estos-ceme	
1 Steel 3 Stainless steel 5 Fiberglass					8 RMP (SR) 11 Other (specify)			
2 Brass 4 Galvanized steel 6 Concrete tile				9 AB	5		e used (op	
SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)  1 Continuous slot 3 Milt slot 6 Wire wrapped 9 Drilled holes								
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)								
SCREEN-PERFORATED INTERVALS: From								
From								
GRAVEL PACK INTE	RVALS: F	rom			Sft., Fron	n	ft. t	toft.
•	F	rom	ft. to		ft., Fron	n	ft. t	o ft.
6 GROUT MATERIAL:	1-Neat ceme		Cement grout	C 3 Bento				
Grout Intervals: From								
What is the nearest source of possible contamination:					10 Livestock pens 14 Abandoned water well			
			7 Pit privy			storage		oil well/Gas well
•			8 Sewage lago 9 Feedyard	oon	12 Fertilizer storage 16 Other (specify b			trier (specify below)
Direction from well?	// <b>/ / /</b>	SITT	-	How mar	• .	177	HIN	
FROM TO	LI	THOLOGIC L	OG .	FROM	TO	.,		NTERVALS
0 12 SILT			CLAN					
12 TD SA	ND d	GRAVE						
		<i>A</i>						
	ω/_	CLAY 6	LAYERS					
	·							
				+				
7 CONTRACTOR'S OR LAND	DOWNER'S	ERTIFICATIO	N: This water well w	(1) constru	cted, (2) reco	nstructed, or (3)	olugged und	der my jurisdiction and was
completed on (mo/day/year)		2/1	19.2		and this reco	rd is true to the be	st of my kn	owledge and belief. Kansas
Water Well Contractor's License					•	on (mo/day/yr)	7	01.1.7.2
under the business name of LAYNE WESTERN CO. WICHITA by (signature) Johnson								

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.