1		WAT	ER WELL RECORD	Form WWC-5	KSA 82a			
LOCATION OF WA	TER WELL:	Fraction	1/4 SW 1/4 SW	· I	tion Number			Range Number
County: E//,05	n from postost to		address of well if located	1/4 city?	28	1 /3	6	R 18 E
		WEST	17 th 5% H			•		
WATER WELL O		TAI MA	RT INC	/				
R#, St. Address, B						Board of A	griculture, D	ivision of Water Resource
ity, State, ZIP Code		OK. 73				Application		Part to Burney
LOCATE WELL'S AN "X" IN SECTION	LOCATION WITH ON BOX:		COMPLETED WELL ndwater Encountered 1.					
i		1						nping gpm
NW	NE		gpm: Well water					
,	1 : 1		neter. 🕏 🦖in. to .					
w	1			5 Public water		8 Air conditioning		njection well
		1 Domesti						Other (Specify below)
-1 sw	SE	2 Irrigation	4 Industrial	7 Lawn and g	arden only	10 Monitoring well		
101		Was a chemica	l/bacteriological sample s	ubmitted to D	epartment? Y	esNo	; If yes,	mo/day/yr sample was su
	<u>S</u>	mitted				ter Well Disinfected		
TYPE OF BLANK	CASING USED:		5 Wrought iron	8 Concre	ete tile	CASING JOI	NTS: Glued	Clamped
1 Steel	3 RMP (S	SR)	6 Asbestos-Cement	9 Other	(specify below	v)	Welde	d
(2 P√C)	4 ABS	_	7 Fiberglass					ded
			7 ft., Dia					
asing height above	land surface		in., weight		lbs./	ft. Wall thickness o	or gauge No	
YPE OF SCREEN (OR PERFORATIO	N MATERIAL:		₽V			estos-cemei	
1 Steel	3 Stainles		5 Fiberglass	8 RM	IP (SR)	11 Othe	er (specify)	
2 Brass	4 Galvaniz		6 Concrete tile	9 AB	S	12 Non	e used (ope	en hole)
CREEN OR PERFO				d wrapped		8 Saw cut		11 None (open hole)
1 Continuous si	_	Aill slot	6 Wire v	vrapped		9 Drilled holes		
2 Louvered shu		ey punched	7 Torch	cut		10 Other (specify)	
CREEN-PERFORAT	TED INTERVALS:							
0541151 5								
GRAVEL PA	ACK INTERVALS:			.3>				
GROUT MATERIA	L: 1 Neat	From	ft. to 2 Cement grout	Bento	ft., Fro	_ _		<u>ft</u>
,	_							. ft. to .3ft.
What is the nearest s			It., FIOIII	IL		tock pens		andoned water well
	4 Late		7 Pit privy			storage		
2 Sewer lines	5 Cess		8 Sewage lago	on		zer storage		her (specify below)
	wer lines 6 Seep	•	9 Feedyard	011		ticide storage	10 01	ner (specify below)
Direction from well?		g- p.:	o . oodya.a		How man	•		
FROM TO		LITHOLOGIC	CLOG	FROM	то		UGGING IN	ITERVALS
0 7.0	BROW	N 5111	L Clay					
		STE S						
7.0 30.0	BROWN	Solly	Clay					
	& SANCE	Moist	StoFF					
300 500	TAN S.	and & a	RAUel					
	moisd 5	mou to	Medium					
				1				
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				-				
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					l			
			TION: This water well wa	s (1) constru	cted, (2) reco	enstructed, or (3) pl	ugged unde	er my jurisdiction and wa
ompleted on (mo/day	//year) . 🎝 🚉	4-93						
ater Well Contracto	r's License No. 🕏		This Water We					
der the business na	ame of Associ	stud Envin	removed Inchesto	in low	by (signat	ure	1 Xan	
INSTRUCTIONS: Use	ypewriter or ball point	pen. PLEASE PRESS	FIRMLY and PRINT clearly. Plea	se fill in blanks, i	underline or circle	the correct answers. Se	end to three c	opies to Kansas Department
of Health and Environ	ment, Bureau of Water,	, Topeka, Kansas 666	520-0001. Telephone: 913-296-55	45. Send one to	WATER WELL	WINER and retain one for	our records.	·