III OCATI	ON OF WA	TED WELL		1 WELL I	HECOHD	Form WWC			makia Niv		D	aa Nisa	-bar		
1 LOCATION OF WATER WELL: County: Ellis			Fraction	SE	<e< td=""><td></td><td>ection Number</td><td>· I</td><td>nship Nu ノフ</td><td></td><td></td><td>ige Num</td><td>• / \</td></e<>		ection Number	· I	nship Nu ノフ			ige Num	• / \		
				DE	1/4 SE		28	Т	13	<u> </u>	R /	18	-50V		
Distance and direction from nearest town or city street address of well if located within city?															
2 WATE	R WELL OW	NER: Bown's	- Servica	Carte	3					· · · · · · · · · · · · · · · · · · ·					
BB# St	Address Ro	x # : 27 th +	1/ine		•		MW-5	 R∕	nard of A	oriculture I	Division of	Water I	Resources		
City, State, ZIP Code : Hans KS							Board of Agriculture, Division of Water Resources Application Number:								
3 LOCATI	E WELL'S L	OCATION WITH 4	DEPTH OF CO	OMPLETI	ED WELL	5.5	ft. ELEVA	TION: .							
AN A	IN SECTIO	De	pth(s) Groundv	vater End	countered 1.		ft. 2	2		ft. 3			ft.		
T	ı	WE	ELL'S STATIC	WATER	LEVEL	ft.	below land sur	face meas	sured on	mo/day/yr]		
1 1	1	i i					ft. a						1		
-	NW	NE _	•								. •		<u> </u>		
	ı	Est	t. Yield	gpm	n: Well wate	r was	ft. a	fter		hours pu	mping		gpm		
ا ف	1	I Boi	re Hole Diame	ter	in. to .			and		in	. to		ft.		
¥	į	¹ WE	ELL WATER TO	O BE US	ED AS:	5 Public wa	ter supply	8 Air con	ditionina	11	Injection v	vell			
-	į.	1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below									low)				
	\text{\text{W}} \text{\text{F}}														
	1		2 Irrigation												
ii L		<u> </u>	is a chemical/b	acteriolo	gical sample s	ubmitted to	Department? Yo	es	جولال	; If yes,	mo/day/y	r sample	was sub-		
		mit mit	ted				Wa	ter Well D	Disinfected	d? Yes		W)			
5 TYPE	OF BLANK	CASING USED:		5 Wroug	ght iron	8 Cond	rete tile	CAS	ING JOI	NTS: Glue	1 0	Clamped	1		
1 St	eel	3 RMP (SR)		6 Ashes	stos-Cement	9 Othe	r (specify below	w)		Weld	ed				
PY	_	4 ABS					• •	•		-			1		
	-,		25-	7 Fiberg							aded				
		in.													
Casing he	ight above la	and surface	:0	in., weigl	ht		<u></u> lbs./	ft. Wall th	ickness c	r gauge N	0				
TYPE OF	SCREEN O	R PERFORATION M	IATERIAL:			P	ve>		10 Asbe	estos-ceme	ent				
1 St	eel	3 Stainless ste	el .	5 Fiberg	nlace	8.6	MP (SR)		11 Othe	er (specify)					
2 Br		4 Galvanized		6 Concr		9 A				e used (op					
				o Conci			.03			, ,	•				
SCHEEN	OR PERFO	RATION OPENINGS	ed wrapped		8 Saw	cut		11 None	(open	hole)					
1 Co	ontinuous slo	ot 3 Mill s		6 Wire wrapped			9 Drilled holes								
2 Lo	uvered shut	ter 4 Key p	ounched		7 Torch	cut		10 Other	r (specify)					
SCREEN-	PERFORAT	ED INTERVALS:	From 3	5	ft. to	53	ft., Fro	m		ft t	0		ft		
							ft., Fro						1		
							ft., Froi								
,	SHAVEL PA	CK INTERVALS:	From⊅≪	•.0	π. το		π., Froi	m					π.		
ļ_ ,			From		ft. to		ft., Fro						ft.		
6 GROUT	T MATERIAL	.: 1 Neat cem m <i>O</i> ft.	ent 🕻	emen	t grout	(3 ⊅Ben	tonite 4	Other		٠٠٠ مر٠٠ ي٠٠]		
Grout Inte	rvals: Fro	m <i>O</i> ft. [.]	to 🖊	ft	From	. / ft.	to. 25.8.	ft	From .	19.8	ft. to .	31.8	ft.		
What is th		ource of possible con		•				tock pens							
·									14 Abandoned water well						
•							Fuel storage								
2 Sewer lines 5 Cess poor			•			on									
3 W	atertight sew	er lines 6 Seepage	pit 9 Feedyard				13 Insecticide storage				.,				
Direction 1	from well?						How ma	ny feet?					i		
FROM	ТО		LITHOLOGIC L	.OG		FROM	то		PL	UGGING I	NTERVAL	S			
0	0.5	Concret													
0.5	5	Dork brown	citt ala			-									
					,	-	1								
5_	10		brown 51		ay		+								
10	55	Lt. brown Sil	ty clay W	Some.	the sand	'									
			<i>y y</i> .												
				-											
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	 					+									
															
L						_L									
7 CONT	RACTOR'S	OR LANDOWNER'S	CERTIFICATION	N. This	water well	as (1) const	ructed (2) room	netructod	or (3) a	lugged use	ler my juri	ediction	and was		
_			6/93	NI. ITHS	water well Wa	as (i) const									
	on (mo/day	• •	9/8/2 0		• • • • • • • • • •		and this reco	rd is true i	to the bes	st of my kn	owiege G	na belie	r. Kansas		
1		's License No	/.	بين	This Water W	ell Record y	as completed	on (m \q /da	y/yr)	~~ <i>?!</i>	. Y.L.	4	··/1./		
under the	business na	me of Konse	s Cid		stina	Lab-l	C by (signa	ture)	محد	$\mathcal{I}_{\mathcal{K}}$	me	10	S		
INSTRU	JCTIONS: Use to	pewriter or ball point pen.	PLEASE PRESS FI	RMLY and	PRINT Clearly Ple	ase fill in blank	s, underline or circle	the object	answers.	end top three	copies to ka	nsus Dena	artment		
of Heal	th and Environn	nent, Bureau of Water, Top	eka, Kansas 66620	0-0001. Tele	phone: 913-296-5	545. Send one	to WATER WELL O	WNER and re	etain one fo	Your records		<i>,</i> • • •			
i .								V							