			WA	ATER WEL	L REC	ORD	Form	ı WWC-	-5	KSA 82a-1212 ID No			0			0706	0706		
1 LOCATION OF WATER WELL: Fraction							<u> </u>				Section Number			Township Number			Range Number		
County:	Ellis				W 1/4	SE	1/4	SW	1/4	·	29		<u> </u> т	13_	S	R	18	£₹/W	
Distance ar	nd direction f						of well	if locate	ed wit	hin city?									
-1 \444===				It - H		KS							_						
$\vdash$	WELL OW			Benne		4 T .L.													
City, State,	dress, Box ZIP Code	:	Ha	02 Hwy ys KS	6760	1							Appli	cation N	umber:				
			N WITH	4 DEPTI	H OF C	OMPLE	TED W	VELL		ł.1	ft. ELE	EVAT	TION:			•••••			
AN "X" IN	N SECTION N	BOX:		Depth(s)	Groun	dwater	Encour	ntered	ร 1 <sup>1</sup>			ft.	2e measured		ft.	3	าว	ft.	
	1	ı		WELLS	SIAIR	ا wait no test	H LEV	Well wa	α.J ater w	π. be	low land su	ıпас . ft. a	e measured after	on mo/a	ay/yr hours	pumpina.	J.J	apm	
	NNA/	NE			d	9	gpm:	Well wa	ater w	as		.ft. a	after						
NW NE - WELL WATER TO BE USED AS: 1 5 Public water supply 8 Air conditioning 11 Injection well																			
W 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify bell W 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well																			
The state of the s																			
SW SE Was a chemical/bacteriological sample submitted to Department? Yes NoX; If yes, mo/day/yrs sam											s sample	was sub-							
mitted Water Well Disinfected? Yes X No																			
<u> </u>	, X   S																		
5 TYPE OF BLANK CASING USED: 2						5 Wrought iron				8 Concrete tile				CASING JOINTS: Glued Clamped					
	· ,					6 Asbestos-Cement				9 Other (specify below)						lded readed			
	2 PVC 4 ABS Blank casing diameter					7 Fiberglass				in to									
Casing height above land surface						tt., Dia				• • • • • • • • • • • • • • • • • • • •	111. 10	lhe /ft Wall t	hickness		ane No	11. 10			
	SCREEN OF					111.,	in., weignt			7 PVC				0 Asbes	-	-		•••••••	
1 Steel 3 Stainless Steel						5 Fiberglass				8 RMP (SR)			11 Other (Specify)						
2 Brass 4 Galvanized Steel 6							6 Concrete tile			9 ABS			1	2 None	used (d	open hole)			
													8 Saw cu			11 No	ne (open h	nole)	
	tinuous slot /ered shutte			fill slot (ey punche	nd.				re wra rch cu	apped It			9 Drilled I 10 Other (s	noies specify)				ft.	
	PERFORATE			• •							# F:	rom		-					
OOI ILLIN-I	LIN ONAIL	-0 11411	INVALO.	From				. ft. to			ft., Fı	rom			ft. 1	to		ft.	
(	GRAVEL PAG	CK INTE	ERVALS																
				From	••••••	••••••	••••••	π. το			π., Γι	rom		•••••	π. ۱		***************************************		
	T MATERIA			t cement			ement	-					Other						
Grout Intervals: Fromft. to							ft., From			ft. to									
What is the nearest source of possible contamination:													ock pens			Abandon		vell	
						7 Pit privy			-				torage 15 er storage 16 er			Other (specify below)			
2 Sewer lines 5 Cess pool					8 Sewage la 9 Feedyard				•			ticide storage				ecity below	w)		
3 Watertight sewer lines 6 Seepage pit Direction from well?						3	i eeuy	aiu				y feet?				***************************************			
FROM TO LITHOLOGIC						LOG				FROM	ТО	1	,	PLUG	GING I	NTERVAL	s		
										0	31	E:	xpanding	Bent	conit	e Seal	<u> </u>		
										31	41		ravel						
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												$\top$							
7 CONTR	ACTOR'S O	R LAN	DOWNE	:R'S CER	TIFICAT	ΓΙΟΝ; Τ	his wa	ter well	was	(1) const	ructed, (2)	reco	nstructed, o	r (3) plu	gged u	nder my j	urisdiction	and was	
completed o	on (mo/day/y	ear)		4.0		9/2	<u>b/03</u>				and thi	is red	cord is true to	the bes	t of my	knowledge	and belie	f. Kansas	
Water Well	Contractor's	Licenc	e No	19	9		T	his Wat	ter We	ell Record	l was comp		d on (mo/day	//yr)	J.Q.Z	14/03	-		
	usiness nam												signature)	111	<u>el</u>	TAIL	Deportment	of Health	
INSTRUCT	FIONS: Use type	ewriter or b	oall point pe	an. <i>PLEASE l</i>	PRESS FI	IHMLY and	I <u>PRINT</u> (	ciearly. Ple	ase fill	ın blanks, ur	naeriine or circl	e the	correct answers.	sena top t	riree copi	es to Kansas	Department	UI FIERIU	

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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.