|   | WATE   | R WELL RECORD F  | Form WWC-5                      | 5 KSA 82a-1                 | 1212  |                                       |
|---|--|--|---------------------------------|-----------------------------|---|---------------------------------------|
| LOCATION OF WATER WEL   |  | NW 1/ A/   |                                 | ction Number                | Township Number   | Range Number                          |
| Distance and direction from nea   | rest town or city street a   | ddress of well if located                                  | within city?                    | · 4                         | 1 1 3 92  | R ÉM                                  |
| , , ,   |  | ANCHESI  | rer                             |                             |   |                                       |
| WATER WELL OWNER:   |  | mittes Ter   |                                 |                             | December Applies to the   | Di tatan di waxa D                    |
| R#, St. Address, Box # :<br>City, State, ZIP Code :   | RAINA A  |  | 67                              | 1401                        | Board of Agriculture,<br>Application Number:                                  | Division of Water Resources           |
| LOCATE WELL'S LOCATION  | $\overline{}$  |  | 4 .                             |                             | TION:   |                                       |
| AN "X" IN SECTION BOX:  | Depth(s) Ground  | water Encountered 1.                                       |                                 | ft. 2.                      |   | 3                                     |
| i [w ! !  | WELL'S STATIC  | WATER LEVEL . 3.3  | 1/2_ft.b                        | elow land surfa             | ace measyred on mo/day/y  | 7-27-72                               |
| NW NE -   |  |  |                                 |                             |   | numping/.5 gpm                        |
|   | Est. Yield   | gpm; Well water  | was                             | ft. afte                    | er hours p  | umping gpm                            |
| * w   1   1   1   |  |  | Public wate                     |                             | اد  | n. to                                 |
|   | 1 Domestic   |  |                                 | ,                           | 9 Dewatering 12   |                                       |
| SW SE -   | 2 Irrigation   | 4 Industrial 🦪   | Lawn and g                      | garden only 10              | 0 Monitoring well,  |                                       |
|   |  | bacteriological sample su                                  | bmitted to De                   |                             | ,   | s, mo/day/yr sample was sub-          |
| TYPE OF BLANK CASING I  | mitted   | 5 14/  | 2 Conor                         |                             | er Well Disinfected? Yes  | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| 1 Steel 3 F   | RMP (SR)   | <ul><li>5 Wrought iron</li><li>6 Asbestos-Cement</li></ul> |                                 | ete tile<br>(specify below) |   | ed Clamped ded                        |
|   | . ,  |  |                                 | ,                           | •   |                                       |
| Blank casing diameter 5 .   | in. to 7. 1  | 7.2. ft., Dia  | in. to                          |                             | ft., Dia  | in to ft.                             |
| Casing height above land surface  | ce/ 🐧  | .in., weight / . 6 O                                       | 1.4B                            | Ibs./ft.                    | . Wall thickness or gauge I   | No. 5.0 R. 26                         |
| TYPE OF SCREEN OR PERFO   |  |  | (7) PV                          |                             | 10 Asbestos-cem   | 4 1 1 1 1 1 1 1 1 1                   |
|   | Stainless steel<br>Salvanized steel  | <ul><li>5 Fiberglass</li><li>6 Concrete tile</li></ul>     | 8 RM<br>9 AB                    | IP (SR)<br>S                |   | ()                                    |
| SCREEN OR PERFORATION O   |  |  | 9 AB:<br>I wrapped              |                             | 12 None used (o   | 11 None (open hole)                   |
| 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes  |  |  |                                 |                             |   |                                       |
| 2 Louvered shutter  | 4 Key punched  | / 7 Torch c  | ut                              |                             | 10 Other (specify)  | toft.                                 |
| SCREEN-PERFORATED INTER   |  |  |                                 |                             |   |                                       |
| GRAVEL PACK INTER   | From   | ft. to   | K7 1/2                          | ft., From                   |   | toft.                                 |
| GRAVEL FACK INTER   | From   | •  | "گاندانگور <sub>و</sub> د       |                             |   |                                       |
| GROUT MATERIAL:   |  | 2 Cement grout   |                                 |                             |   |                                       |
| Grout Intervals: From   | ) ft. to   | ft., From  | ft. '                           |                             |   | ft. to                                |
| What is the nearest source of possible contamination:   |  |  |                                 | 10 Livesto                  | <b>F</b>  | Abandoned water well                  |
|   | 4 Lateral lines<br>5 Cess pool   | 7 Pit privy<br>8 Sewage lagoo                              |                                 |                             | Fuel storage 15 Oil well/Gas well Fertilizer storage 16 Other (specify below) |                                       |
| (3) Watertight sewer lines  | 9 Feedyard   | n  |                                 | cide storage                | Other (specify below)   |                                       |
| A i   | ATAC   |  |                                 | How many                    | y feet? 33  |                                       |
| FROM, TO  | LITHOLOGIC   |  | FROM                            | ТО                          | PLUGGING  | INTERVALS                             |
| 0 0   | mpacted  | SICT   |                                 |                             |   |                                       |
| 2' 29' 6/0  | UD SITT  |  |                                 |                             |   |                                       |
| × × × × × ×   | (R)00  | , N )  |                                 |                             |   |                                       |
|   |  |  |                                 |                             | REC   | CEIVED                                |
| 29' 57'5' M   | ledium Ti  | · Coarse   |                                 |                             | 1120  | )CIVE()                               |
|   | MAN MAN  |  | -                               |                             | APR   | <b>2 5</b> 2005                       |
| )   | AND MY   | D Grav   | 2_                              |                             |   |                                       |
|   | 101000000000000000000000000000000000000  |  |                                 |                             | BUREAU  | OF WATER                              |
|   |  |  |                                 |                             | ,   |                                       |
|   |  |  |                                 |                             |   |                                       |
|   |  |  |                                 |                             |   |                                       |
|   |  |  |                                 |                             |   | ,                                     |
| - 30:170:070:00 00 144/00   | CONTRACTOR OF THE CONTRACTOR O |  | -104-20                         |                             |   |                                       |
| CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas |  |  |                                 |                             |   |                                       |
| Water Well Contractor's License   |  | This Water Well  |                                 | and this record             | is tide to the best of my ki  | lowledge and belief. Karisas          |
| under the business name of  | MIDWE  | LC Serv  |                                 | by (signatur                |   | 1 Den Ruga                            |
| INSTRUCTIONS: Use typewriter or ba  |  | IRMLY and PRINT clearly. Please                            | e fill in blanks, u             | inderline or circle th      | he correct answers. Send top three  |                                       |
| of Health and Environment, Bureau of  | of Water, Topeka, Kansas 66620   | )-0001. Telephone: 913-296-554!                            | <ol><li>Send one to Y</li></ol> | WATER WELL OWN              | NER and retain one for your record  | S.                                    |