W	ATER WELL RECORD	Form WWC-5	KSA 82a-	1212 ID No.		
1 LOCATION OF WATER WELL: County: SALINE	Fraction SE 1/4 N	W 1/4 SE	Sec 1/4	ction Number 11	Township Number	Range Number
Distance and direction from nearest town or city street address of well if located within city?						
148 W. PRATRTE R. 2 WATER WELL OWNER: GARY	IDGE					
RR#, St. Address, Box # : 148 Pi	RAIRIE RIDGE					e, Division of Water Resources
3 LOCATE WELL'S LOCATION WITH	A.KS. 67401	PLETED WELL	73	# FLEVATI	Application Number	:
AN "X" IN SECTION BOX:	Depth(s) Groundwa WELL'S STATIC WA	ter Encountered	.125 ft. bel	w land surface	2ft measured on mo/day/yr	. 3 . 11-25-03 ft. s pumping 25 gpm
NW NE	WELL WATER TO E	gpm: Well wate BE USED AS: 5	r was r was Public water : Oil field water	ft. aft supply &	ter hours 8 Air conditioning 11	s pumpinggpm s pumpinggpm Injection well ! Other (Specify below)
W 1 E 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well						
Was a chemical/bacteriological sample submitted to Department? Yes No .X; If yes, mo/day/yrs sample was submitted Water Well Disinfected? Yes X No						
5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (S		Vrought iron	8 Concre	ete tile (specify below)		uedX Clamped
_2 PVC 4 ABS `	7 F	iberglass			Th	readed
Blank casing diameter55	in. to	∷ ft., Dia	160	in. to	ft., Dia	ft.
TYPE OF SCREEN OR PERFORATION		in., weight	7 PV		os./ft. Wall thickness or gu 10 Asbestos-C	•
1 Steel 3 Stainless Steel 2 Brass 4 Galvanized Steel				IP (SR)		ify)
SCREEN OR PERFORATION OPENINGS ARE: 5 Guazed wrapped 8 Saw cut 11 None (open hole)						
1 Continuous slot 3 Mill slot 025 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)ft.						
SCREEN-PERFORATED INTERVALS: From						
From						
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
Grout Intervals: From	ft. to28	ft., From	ft. t	0	ft., From	ft. toft.
What is the nearest source of possible	contamination:			10 Livesto	ck pens 14	Abandoned water well
1 Septic tank 4 Lateral lines		7 Pit privy		11 Fuel sto		Oil well/Gas well
2 Sewer lines 5 Ces	•	8 Sewage lagoon		12 Fertilize	_	Other (specify below)
3 Watertight sewer lines 6 Seepage pit Direction from well? SOUTHEAST		9 Feedyard		13 Insecticide storage . How many feet? OVER 10		
FROM TO SOUTH	LITHOLOGIC LO	3	FROM	TO TO		INTERVALS
0 2 TOP SO			1110		Loddina	
2 10 SANDSTO	ONE BROWN TO	RUSTY RED				
10 24 CLAY G						
24 25 CLAY YE						
	ONE TAN					
72 73 SHALE (irai		1			
			<u> </u>			
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)						
completed on (mo/day/year)11-20-	-0.7 388			and this reco	ord is true to the best of my	knowledge and belief. Kansas
Water Well Contractor's Licence No under the business name of PESTI			Well Record		on (mo/day/yr)f	leter-
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department 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.						