		RECORD		Form WW(Division of Water Resources; App. No.			
1 LOC Coun	ATION O	F WATER WELL A L I いん	L:	Fraction Fraction Fraction Fraction Fraction Fraction Fraction Fraction Fraction Fraction	SW 1/4	Section Nu		Township Number T /3 S	Range Number R 4 E/W
Dista	nce and dir	ection from neares	t town or city	y street address of	well if	Global Posi	itioning	Systems (decimal degr	
locate	ed within c	ty? 9/03	W.	HEALY T	D_{A}	Latitude:	· ·	- 44 4	
2 WA	TER WEL	L OWNER: \T	DNI AL	-BRET PLU	MICI	Elevation	·		
RR#	, St. Addre	ss, Box # : $\ddot{\boldsymbol{G}}$	103 W	, HEALY	4 D	Datum:			
City	State, ZIP	Code : B	PODKY	11 Luis Ba	107425		ection N	Method:	
City, State, ZIP Code : BEOOK VILLE, Rd (67425 Data Collection Method: 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL									
LOC	ATION								
	H AN "X"	IN Depth(s) G	roundwater I	Encountered (1)	الألمان	ft. ((2)	ft. (3)	ft.,
SEC'	WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered (1) ft. (2) ft. (3) ft. (3) ft. well.'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yrl								
	Pump test data: Well water was								
	Est. Yieldgpm: Well water wasft. after hours pumpinggpm								
	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Demostic 3 Feedlet 6 Oil field water supply 9 Demostring 12 Other (Specify below)								
W	W I Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well								
Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs									
Sample was submitted									
S									
5 TYPI	E OF CAS	ING USED:	5 Wrought In	ron 8 Coi	ncrete tile		CASINO	G JOINTS: GluedX	Clamped
			6 Asbestos-C	Coment 0 Oth	er (enecify	helow)		Welded	-
2 PVC 4 ABS 7 Fiberglass Threaded									
Blank casing diameter									
Casing height above land surface									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)									
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:									
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)									
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw cut 10 Other (specify)									
From ft. to ft. From ft. to ft.									
From									
From ft. to ft., From ft. to ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other									
I		ERIAL: Neat	cement 2 C	ement grout 3 E	entonite	4 Other		t., From	
Grout Ir		source of possible			•••••••	π. το	п	, From	It. toIt.
1		•			10 Livesto	ock nens	13 Ins	ecticide storage	16 Other (specify
1									below)
		sewer lines 6 Se				er storage			
Directio	n from wel	1? Spus	ົ <i>ໂ</i> ສັ່		How man	y feet?	15.	2	
FROM	TO	LI	THOLOGIC	LOG	FROM	ТО		PLUGGING INTI	ERVALS
	2	TOP SOI							
2	17	Chay TA	4 N						
Ϊ́	27	SAND FIR	E AND	TRON STO	DE				
		BEBRLES	BEDW	W					
						-			
F CONT	ED A OTTO	NC OD LANDON	UNIEDIO OF	DTIELCATION	This		1) com-d	moted (2)	ad am (2)1 1
7 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) (1)									
Kansas Water Well Contractor's License No. 3.5 This Water Well Record was completed on (mo/day/year)									
under the business name of Pisting Lie Pump Sievic by (signature)									
INSTRU	CTIONS: U	e typewriter or hall no	int pen. PLEAS	SE PRESS FIRMLY and	PRINT clear	ly. Please fil	l in blanks	s, underline or circle the co	rect answers. Send ton
three copi	es to Kansas	Department of Health a	and Environmen	t, Bureau of Water, Geo	ology Section.	, 1000 SW Jac	ekson St.,	Sulte 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. Visit us at http://www.kdheks.gov/waterwell/index.html.									
							e of \$5.	00 for each constructed	well. Visit us at