			ATER WELL REC	ORD	Form WWC	C-5 KSA 82	a-1212	ID No.				
1 LOCATION County: Li	OF WAT ncolr		Fraction SW 1/4	NE	_{1/4} NE	E 1/4	ection N 18	umber	Township T	Number S	Range Number	
		rom nearest to	wn or city street	address c		ted within city?						
2 WATER WE	LL OWN	IER:Randy	leier									
RR#, St. Address, Box # : 1924 E. Deer Drive City, State, ZIP Code : Lincoln, KS 67455 Board of Agriculture, Divided the Application Number:									Division of Water Resources			
3 LOCATE WEL	L'S LO	CATION WITH	4 DEPTH OF C	OMPLET	TED WELL .				ON: unkr			
Depth(s) Groundwater Encountered 1									9,08,05gpm pumpinggpm njection well Other (Specify below)			
mitted Water Well Disinfected? Yes										No		
		ASING USED:			ight iron		rete tile				edClamped	
1 Steel 2 PVC	1 Steel 3 RMP (SR) 2 PVC 4 ABS				6 Asbestos-Cement 9 Other 7 Fiberglass			• ,		Welded Threaded		
Blank casing dia	ameter .	5	in. to	115	ft., Dia	a	in. 1	to	ft., C	Dia	ft.	
Casing height a	bove la	nd surface		in.,	weight	2.8		It	os./ft. Wall thick	ness or gua	ge No. Sch. 40	
TYPE OF SCRE		PERFORATIO	ON MATERIAL:			7 F	VC		10 A	sbestos-Cer	nent	
1 Steel 3 Stainless Steel 5 Fibergla 2 Brass 4 Galvanized Steel 6 Concrete						8 RMP (SR) 9 ABS			11 Other (Specify)			
2 5,436									11 None (open hole)			
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled ho									9 Drilled hole			
2 Louvered	shutter	4 K	Key punched			orch cut					ft.	
SCREEN-PERF	ORATE	D INTERVALS	: From	115	ft. to	175	ft	., From		ft. to)ft.	
GRAV	/EL DAC	K INTERVALS	From	40	ft. to	175	ft	., From		ft. to	oft.	
dia	LLIA	IN IN LAVALO)ft.	
al a==												
6 GROUT MA					ment grout		ntonite				ft to ft	
Grout Intervals: From									Abandoned water well			
1 Septic ta		4 Late		7 Pit privy 11 Fuel ste								
2 Sewer lines 5 Cess pool				8 Sewage lagoon			12	12 Fertilizer storage 16 Other (specify below)				
_		rlines 6 Seep	page pit	ge pit 9 Feedyard				13 Insecticide storage noneinpasture				
Direction from w							-T	low many				
FROM	то		LITHOLOGIC	CLOG		FROM	TC	<u> </u>	P	LUGGING II	NTERVALS	
0	_3	top soil					+					
6	6 37	clay sand roo	~l~									
37	44	quartzit										
44	110	shale										
110	175	sand roo	ck with sha	ale st	reaks						·	
							<u> </u>					
			· · · · · · · · · · · · · · · · · · ·									
7							1					
completed on (m Water Well Cont	o/day/yo ractor's	ear)0(Licence No	9/08/05 1 86		This W	ater Well Reco	an	d this reco	ord is true to the on (mo/day/yr)	best of my k	der my jurisdiction and was nowledge and belief. Kansas 12/05	
			's Water W						ignature)	Mug	x-usad	

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 Healt 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 <u>constructed</u> well.