LOCATION OF WA	ATER WELL: F	WELL RECORD		KSA 82a-1	212 ID No tion Number	Township Nun	nber	Range Number
County: J'ANI			)E 14 SW 14		9	т 14	s	R 2WE/
			ess of well if located v	vithin city?		•		
1501	E. BEL	OIT						
	NER: CURTIS							
RR#, St. Address, Box City, State, ZIP Code	# : 1501E	· BELON				Application N	ımber:	vision of Water Resou
LOCATE WELL'S LO		EPTH OF COM						
AN "X" IN SECTION	BOX: Dep	pth(s) Groundwa	ter Encountered 1	23	ft. 2		ft. 3 .	
	WE	LL'S STATIC WA	گلی ATER LEVEL . est data: Well water	ft. belo	w land surface r	neasured on mo/d	ay/yr <del>y.</del>	-6-07
1	L Est	Yield 40	gpm: Well water	waswas	ft. afte	r	hours pur	npingg
NW -	- NE   WE	ELL WATER TO E	BE USED AS: 5 P	ublic water s	upply 8	Air conditioning		ection well
	1	1 Domestic		il field water		Dewatering		ner (Specify below)
W X		2 Irrigation	4 Industrial Z.D	omestic traw	n & gargen) 10	Monitoring well		
CVA	SE					<b>X</b>		
SW -	- SE   Wa:		cteriological sample s	ubmitted to E				
'	, i iiii	.eu			wate	r Well Disinfected	res 🗡	No
<u>S</u>								·
TYPE OF BLANK			Wrought iron Asbestos-Cement	8 Concre		CASING JOIN		Clamped
1 Steel 2_PVC	3 RMP (SR) 4 ABS		Asbestos-Cement Fiberglass	-	specify below)			d led
Blank casing diameter		in to 3	ft., Dia					
Casing height above la	and surface		in., weight	O	lbs	s./ft. Wall thickness	or quage	No SDE 26
TYPE OF SCREEN O			, 0	7_PV(			tos-Ceme	
1 Steel	3 Stainless Ste		Fiberglass		P (SR)	11 Other	(Specify).	•••••
2 Brass	4 Galvanized S	iteel 6 (	Concrete tile	9 ABS	3	12 None	used (ope	n hole)
SCREEN OR PERFO	RATION OPENINGS	ARE:	=	d wrapped		8 Saw cut		11 None (open hole)
1 Continuous slot		01 ,025	6 Wire w 7 Torch			9 Drilled holes		
2 Louvered shutte	er 4 Key pu	unched	) ft. to					
SCREEN-PERFORAT	ED INTERVALS: F	-rom	ft. to ft. to ft. to	/	ft., From		ft. to	
GRAVEL PA	.CK INTERVALS: F	From	ft. to		ft., From		ft. to	
			ft. to					
OBOUT MATERIA	N. 4 Nostasa	/	2 Compant arrows	2 Post	onite 4 (	)+h = =		
GROUT MATERIA  Grout Intervals: Fro			2 Cement grout ft., From					
What is the nearest so			11., 1 10111	IL IL	10 Livestoc			andoned water well
	4 Lateral lin		7 Pit privy			age		
2 Sewer lines	5 Cess pool		8 Sewage la		12 Fertilizer	=		ner (specify below)
	er lines 6 Seepage		9 Feedyard	.goon	13 Insectici	•		
Direction from well?	NOET		5 , 55 <b>5,</b> 4.5		How many f			
FROM TO		ITHOLOGIC LO	G	FROM	то		GING INT	ERVALS
	FILL DIE							
2 72			SILTY					
12 23		AN						
12 83			MED. TA	J				
49	SHAL'S	GREE	431 Can				,	. ₹ <b>₽</b> ;
		1						
<del></del>								
						***************************************		
		<del></del>						
CONTRACTOR'S	DR LANDOWNER'S	CERTIFI <u>C</u> ATIO <b>)</b>	N: This water well was	s (1) constru	cted_(2) recons	tructed, or (3) plu	gged unde	r my jurisdiction and
CONTRACTOR'S Completed on (mo/day/	DR LANDOWNER'S (year)	CERTIFICATION	N: This water well was	s (1) constru	cted, (2) recons	tructed, or (3) pluy	gged unde	r my jurisdiction and wledge and belief. Kar
CONTRACTOR'S Completed on (mo/day/yater Well Contractor's nder the business nar	s Licence No	CERTIFICATION	N: This water well was	s ( <u>1) constru</u>	vas completed o	tructed, or (3) plug d is true to the bes on (mo/day/yr) nature)	gged unde	r my jurisdiction and wledge and belief. Kar

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 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.