WATER WEI	LL RECORD	Form WWC-5	KSA 82a-	1212 ID No	0						
1 LOCATION OF WATER WELL: Fracti		Section Number			Township Number			Range Number			
County: Saline Nu	J 14 NE	1/4 SW 1/4	<u> </u>	19	T	14	s		Ž	E/W	
Distance and direction from nearest town or city	street address	of well if located v	within city?								
1507 E Minneapol	13 , Sa	lina, K	S-								
RR#, St. Address, Box # : 1507 E. M	nger	•									
RR#, St. Address, Box # : /507 E. M. City, State, ZIP Code : Sa Ina		2				rd of Agrid		ivision of	Water R	esources	
3 LOCATE WELL'S LOCATION WITH 4 DEPT		TED WELL 5	18,3	ft. ELEVAT	LION.	ication iv	uniber.				
AN "X" IN SECTION BOX: Depth(s)) Groundwater	Encountered 1	2,	/ ft	2	••••				44	
N WELL'S	STATIC WATE	<u>بەركىج</u> ى. R LEVEL	.:: ft. beld	ow land surface	e measured	l on mo/d	av/vr	2/4	104		
	Pump test of	data: Well water	was	ft. a	after		hours pu	pnigm		apm	
	ي	pm: Well water		ft. a supply						gpm	
			oblic water s		8 Air cond 9 Dewater	_		jection w ther (Spe	eii ecify belo	w)	
W X E 2 Irri	igation 4 l			vn & garden)							
SW SE Was a c	Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs sample wa								was sub-		
mitted Water Well Disinfected? (Yes) No											
5 TYPE OF BLANK CASING USED:	5 Wro	ught iron	8 Concre	ete tile	CASII	NG JOIN	TS: Glued	11/	Clamper		
1 Steel 3 RMP (SR) 6 Asbestos-Cement				(specify below)		1000111					
2 PVC) 4 ABS	7 Fibe	rglass					Threa	aded			
Blank casing diameterin	ı. to	ft., Dia	17.0	in. to		.ft., Dia		ir	ı. to	ft.	
Casing height above land surface		weight		~					•••••		
TYPE OF SCREEN OR PERFORATION MATER 1 Steel 3 Stainless Steel		PVC 10 Asbestos-Cement									
1 Steel 3 Stainless Steel 5 Fiberglass 2 Brass 4 Galvanized Steel 6 Concrete tile							11 Other (Specify)				
SCREEN OR PERFORATION OPENINGS ARE:		5 Guaze	ed wrapped		8 Saw cı	ut		11 Non	e (open h	nole)	
1 Continuous slot 3 Mill slot		6 Wire v	vrapped		9 Drilled	holes			` '	,	
2 Louvered shutter 4 Key punche		7 Torch			10 Other	(specify)		•••••		ft.	
	38		18								
From	2	ft. to 3ft. to	5 4/8	ft., From			ft. to	·····		ft.	
		π. το ft. to									
6 GROUT MATERIAL: 1 Neat cement		ement grout			Other						
Grout Intervals: From		ft., From	ft. t			m					
What is the nearest source of possible contamin	ation:	7 04		10 Livest	•			bandone il well/Ga	d water w	veli	
1 Septic tank 4 Lateral lines		7 Pit privy	agoon	11 Fuel s						A()	
·		8 Sewage la 9 Feedyard	_	joon 12 Fertilizer storage 13 Insecticide storage			16 Other (specify below)				
Waterlight sewer lines 6 Seepage pit Direction from well?		3 recuyard			y feet? 4						
	DLOGIC LOG		FROM	TO	y 1001		GING IN	TERVALS	S		
0 75 Clay	20010 200		1110								
25 30 Sand - Cla											
	Gravel										
30 /											
7											
CONTRACTOR'S OR LANDOWNER'S CER	TIFICATION: TI	his water well wa	(1) constru	ucted, (2) reco	nstructed, o	or (3) plu	gged und	er my ju	risdiction	and was	
completed on (mo/day/year) 5/4/0.5 Water Well Contractor's Licence No	1 2 7	This 14/	Mail Decem	and this rec	cord is true t	o the bes	t of my kn	owledge	and belie	r. Kansas	
			veli necord		a on (mo/aa signature)	ر (۱۷/۷۱)	~.	001	<i>J</i>		
INSTRUCTIONS: Use proewiter or hall point pen PI FASE	e Inc		fill in blanks und			Send ton	hree copies	to Kaneae [)enartment	of Health	

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 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 <u>constructed</u> well.