WATER V	WELL I	RECOR	D	Form WW(Form WWC-5			Division of Water Resources; App. No.			
1 LOCATION OF WATER WELL: County: ALINE			Fraction NEWNW14	رس الاست	Section N		Township Number T / 4 S	Range Number R Q W E/W			
Distance	and direc	tion from	nearest town or o	rity street address of a	well if			Systems (decimal deg			
located v	within city	?~~	A 11	\mathcal{L}	Latitude:			·			
		<u> XIX</u>	3 HUNT	TINGTON Y	INGTON RD.			Longitude			
2 WATE	R WELL	OWNER	: JOYCE	EDWARD	Edwards Ro. Elevation Datum:						
RR#, St	. Address	Box #	2127+	INNTINGTOI	o Ko.	Datum:					
City, St	ate, ZIP C	040	CALINI	4. 15.		Data Co	llection 1	Method:			
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL ft.											
LOCAT	ION				_						
WITH AN "X" IN SECTION BOX: N Depth(s) Groundwater Encountered (1)											
	N		Pump test dat	ta: Well water was	::\.	ft. after		hours pumping	gpm		
		Est.	Yieldgp:	m: Well water was.	1.12	ft. after.	O A	hours pumping.	gpm		
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below											
Was a chemical/bacteriological sample submitted to Department? Yes No Y: If yes, mo/day/yrs											
Was a chemical/bacteriological sample submitted to Department? Yes											
	S		•								
5 TYPE O	F CASIN	G USED:	• 5 Wrought	t Iron 8 Con	ocrete tile		CASING	G JOINTS: Glued	Clamped		
1 Ste		RMP (SR)) 6 Asbestos	s-Cement 9 Oth	er (specif	v helow)	CASII	Welded	Ciamped		
2 PVC 4 ABS 7 Fiberglass Threaded											
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)											
			OPENINGS AR		m 1	0.75.11		1137 / 1	1 \		
1 Continuous slot 3 Mill slot, 03 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) SCREEN-PERFORATED INTERVALS: From ft. to ft.											
From											
GRAVEL PACK INTERVALS: From. 24 ft. to ft., From ft. to ft.											
From											
1 IOIII It. to It., FIOIII It. to It.											
6 GROUT	MATER										
Grout Inter		From				. ft. to	f	t., From	ft. toft.		
		ource of po	ossible contamina								
-	tic tank		4 Lateral lines	1 7		tock pens		_	16 Other (specify		
	ver lines		5 Cess pool	8 Sewage lagoon							
	tertight se			9 Feedyard			e 15 O				
Direction fr				CT 00		ny feet?			PDIZAT O		
FROM	TO	<i>2</i>	LITHOLOGI	C LOG	FRON	1 TO		PLUGGING INTI	RVALS		
		FILL	DIET	P#1 = +4							
		CLAY									
			FINE 7		رسى . ي						
21	15	SAND	S PIROL T	o med tan	LLA	<u> γν</u>					
							+				
							 				
					+						
7 CONTD	\CTOP'	ORIAN	NDOWNED'S C	ERTIFICATION.	This water	r well was	(1) constr	ucted (2) reconstruct	ed or (3) plugged		
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) (2)											
Kansas Wat	ter Well C	ontractor'	's License No.	This Wate	er Well Re	cord was c	ompleted	on (mo/day/year) Q .	4-01-08		
under the h	usiness na	me of	ESTIMAL E	Dama	۱ کوسو	v (sionati	re\				
INSTRUCTION	ONS: Use t	ypewriter or	ball point pen. PLE	ASE PRESS FIRMLY and	PRINT clea	rly. Please f	ill in blanks	the state of the s	rrect answers. Send top		
three copies to	Kansas Der	partment of l	Health and Environm	ent, Bureau of Water, Geo	logy Section	n, 1000 SW J	ackson St.,	Suite 420, Topeka, Kansas	66612-1367. Telephone		
785-296-5522.	Send of	one to WA	ATER WELL OW:	NER and retain one	for your i	records. F	ee of \$5.	00 for each constructed	well. Visit us at		
http://www.kd	neks.gov/wa	ierweii/inde	x.IIIIII.	 							