	CHOL		2°7' A \ A \		Some MANA	TE VOLUM	1010	1	W. W. ~	
1LI OCATIO	N OF WAT	ER WELL:		R WELL RECORD	Form WW	C-5 KSA 82a Section Number	Township Nu	mber	Range Num	ober
	Salv		SC2 1/4	SW 14 N) (T 16-1	s	в 0 3	EW
Distance ar	nd direction	from nearest tow	vn or city street a	ddress of well if locat		/?	d		AND THE RESIDENCE AND ADDRESS OF THE PARTY O	
West North Street Road, Salma KS										
A WATTO WILL OWNER, BUILD D. CONT. SERVICE										
RR#, St. Address, Box # : 14650 South Fe The Transfer Board of Agriculture, Division of Water Resources										
City, State,			exc. Ki				Application Number:			
3 LOCATE	WELL'S LO	CATION WITH	A DEBTH OF C	COMPLETED WELL) # CLEVA	TION: 1723	. GG		
AN "X"	IN SECTION	I BOX:	Donth(c) Ground	water Encountered	1 15	A. A.)			fr
an Proces		- Lancon Commonweal Common Com								
WELL'S STATIC WATER LEVEL										
Est. Yield gpm: Well water was ft. after hours pumping										~.
Bore Hole Diameter in. to										
~	1	953								olovu)
1 Domestic 3 Feedlot 6 Oil field 2 Irrigation 4 Industrial 7 Lawn an					water supply 9 Dewatering 12 Other (Specify below) d garden only 10 Monitoring well					
		9		4 moustnar bacteriological sample						
<u> </u>	SEASTER OF THE SEASTER		l	bacteriological sample	submitted to		ອຣ ter Well Disinfected		mo/day/yr sampir Mo >∽	400
James			mitted	P* AAL	0.0-				Clamped	
proof		ASING USED:	rs1	5 Wrought iron		ncrete tile				
1 Ste		3 RMP (SI	H)	6 Asbestos-Cemen		. ,	•		d	
C2-PV		4 ABS	Q.	7 Fiberglass			fa Poin			
Blank casing diameter in. to S. C. ft., Dia in. to										
				.in., weight						174
		R PERFORATIO		per garetty		PVC		estos-cemer		
1 Ste	-	3 Stainless		***	8					
	2 Brass 4 Galvanized steel SCREEN OR PERFORATION OPENINGS ARE:				6 Concrete tile 9 ABS			e used (ope	•	hata)
				5 Gauzed wrapped			8 Saw cut		11 None (open	noie)
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)										
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)										
SCHEEN-F	*EHFORA II	ED INTERVALS:		ft. to						
	YEAN/EL EVA.	CK INTERVALS:	riom	Second fit to	70,			II. IV. 4t - 4c	,	
G	AUWAEL LW	OK INTERVALS.	From	ft. to						
el coour	LAICETTAL	. 1 Noat		CONTRACTOR						
GROUT MATERIAL: 1 Neat cement 2 Gement grout 3 Bentonite 4 Other										
				(0, 1)0///					andoned water v	
What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines				7 Pit privy		entropy in the control of the contro	and Wilder.		Oil well/Gas well	
2 Sewer lines 5 Cess pool				8 Sewage lagoon					16 Other (specify below)	
3 Watertight sewer lines 6 Seepage pit			•	9 Feedyard			ticide storage	10 01	nor (opoony zoro	,
Direction fi	-	SSC	7	5 i coayara		How ma	-			
FROM	TO		LITHOLOGIC	LOG	FROM	announce of a commence of the	PL.	UGGING IN	ITERVALS	TPR ST ST TRACE / FILL SEE SEE ST TWO TO SEE
0	0,5	Concrete						THE PERSON NAME AND ADDRESS OF THE PERSON OF		and the control of th
0.5	地		sultycky							
12×15	20.5			sille - west				manus communication and an extension of the second		
1,943 1.2								**************************************		
			CONTRACTOR							
				and the second s			Commence of Section 2 and 2 an		~~~	
				abanco acamando do Cardo do como como como como como como como				The second secon		THE COMMENT OF THE PARTY OF THE
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17	10 g gragosa 200, pina a ura		englyng payment and a	72/% 6 1 1994	- Com	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		h	mar may a truster 35 - 45	
7 CONTE	ACTOR'S	OH LANDOWNE	หร CEHTIFICAT อริง แตร์	TON: This water well						
completed	on (mo/day	/year) 10:::3	A9.77	70°b. (owledge and beli	er. Kansas
1				This Water	well Hecord	·		ATP	Section 2	
Para tan Anna and anna anna anna anna anna ann	business na	ime of (SED46CKVC	7009A		by (signa		LVILLU	Ten	
INSTRU of Healt	ICTIONS: Use to the and Environn	ypewriter or ball point nent, Bureau of Water	pen. <u>PLEASE PRESS</u> r, Topeka, Kansas 666	FIRMLY and PRINT clearly. 20-0001. Telephone: 913-29	Please fill in bla 16-5545. Send or	nks, underline or circl ne to WATER WELL C	e the correct answers. S WNER and retain one fo	end top threé o or your records	copies to Kansas Dep	partment