			WATER V	ELL RECORD	Form WWC-5			
1 LOCATIO		ER WELL:	Fraction	SW 1/2 NW		tion Number 36	Township Number	Range Number
County:	d direction	from pearest town	SW 1/4		d within city?	<u> </u>	T 14 S	R
Distance an	a direction	IIOIII Healest town		HIGHLAND AV				
2 WATER	WELL OW							
RR#, St. A			HIGHLAND AVE	•			•	, Division of Water Resources
			KS. 67401		70 0		Application Number:	
AN "X" II	N SECTION	³ BOX: L	Depth(s) Groundwat	er Encountered 1	<u> 1,</u> 8	3 • 7 ft. 2	.TION: 1#	3ft.
1 Stee 2 PV(Blank casin Casing heig TYPE OF S 1 Stee 2 Bras	el g diameter ght above la SCREEN O el ss	ASING USED: 3 RMP (SR 4 ABS And surface	Pump te Est. Yield 50+ Bore Hole Diameter WELL WATER TO I 1 Domestic 2 Irrigation Was a chemical/bac mitted 5 6 48.8 7 in. to	st data: Well water gpm: Well water 9. in. to	or was 60 5 Public wate 6 Oil field wa 7 Lawn and 6 Submitted to Discounting 9 Other in. to 60	tt. a ft. a ft., ft., r supply ter su	ifter	pumping
SCREEN O	R PERFO	RATION OPENING	S ARE:	5 Gauz	ed wrapped			11 None (open hole)
1 Con	ntinuous slo	t <u>3 Mil</u>	l slot .025	6 Wire	wrapped		9 Drilled holes	
2 Lou	vered shut	ter 4 Ke	y punched	7 Torch		.	10 Other (specify)	
SCREEN-P	ERFORATI	ED INTERVALS:						toft.
GI	RAVEL PA	CK INTERVALS:	From					toft.
			From	ft. to		ft., Fro	m <u>ft.</u>	to ft.
6 GROUT Grout Interv What is the	als: Fro	.: 1 Neat or mo ource of possible of		Cement grout . ft., From	_3_Bento			to ftft. toft. Abandoned water well
1 Septic tank 4 Latera			l lines	7 Pit privy		11 Fuel storage 15 Oil well/Gas well		
2 Sew	ver lines	5 Cess	pool	8 Sewage lagoon		12 Fertilizer storage		Other (specify below)
3 Wat	tertight sew	er lines 6 Seepa		9 Feedyard			ticide storage	• • • • • • • • • • • • • • • • • • • •
Direction fro		SOUT			- FDO14	How ma		INTERVALO
FROM 0	<u>ਾਰ</u>	FILL DIR	LITHOLOGIC LO	3	FROM	то	FLOGGING	INTERVALS
3	26	CLAY TAN						
26	60		E TO MED. TA	N WITH CLAY				
20	- 00	LAYERS	i IO Paid. 114	1 112111 02112				
		LATERS						
7 CONTR	ACTOR'S	OR LANDOWNER	S CERTIFICATION					nder my jurisdiction and was
completed of	on (mo/day	_{/vear)} 2-2	9 - 00			and this reco	rd is true to the best of my	nowledge and belief. Kansas
Water Well	Contractor	s License No	388	This Water W	/ell Record wa	s completed	on (modelay/yr)	-00)
under the b	usiness na	me of PESTIN	GER PUMP SER	VICE		by (signa	tura Celent	esting
INICTOLIC	TIONS: Use to	nauritar or hall point n	en PLEASE PRESS FIRM	Y and PRINT clearly. Ple	ease fill in blanks,	underline or circle	the correct answers. Send top three	e copies to Kansas Department
of Health	and Environm	ent, Bureau of Water,	Topeka, Kansas 66620-000	01. Telephone: 913-296-5	545. Send one to	WATER WELL O	WNER and retain one for your recor	ds.