<del></del>			WATER WELL REC	CORD Form V	VWC-5	KSA 82a-1	212 ID No			
1 LOCAT	ION OF WA	TER WELL:	Fraction SW 1/4	NE 14	SE 14	Sect	ion Number 36	Township Number T 14 s	Range Number	
Distance ar			town or city street			nin city?				
		NER: DICK	HOUSE							
RR#, St. Ac	dress, Box ZIP Code	# : 2752 : SALI	MELANTE LAN	L				Application Number:	Division of Water Resources	
			H 4 DEPTH OF C	OMPLETED WE	LL	55	ft. ELEVAT	ION:1241		
AN "X" IN	SECTION N	BOX:	WELL'S STATI	C WATER LEVEI mp test data: W	ell water wa	ft. belov as2	w land surface	2ft. : e measured on mo/day/yr fter hours	3 9-08903 pumping20gpm pumpinggpm	
	-NW	- NE	WELL WATER 1 Domestic	TO BE USED AS 3 Feedlot	6: 5 Pub 6 Oil 1	lic water so field water	supply supply	8 Air conditioning 11 9 Dewatering 12 9	Injection well Other (Specify below)	
SW SEX Was a chemical/bacteriological sample submitted to Department? Yes NoX; If yes, mo/day/yrs sample was mitted Water Well Disinfected? Yes X No									mo/day/yrs sample was sub- { No	
	S							•		
5 TYPE C 1 Stee 2 PVC	l	ASING USE 3 RMP 4 ABS		5 Wrought iron 6 Asbestos-Ce		•	pecify below)	Wel	edX Clampedded	
Blank casin	a diameter		in to	7 Fiberglass 50 #	Dia				eaded	
Casing heigh	ght above la	nd surface	14	in., weight		160		bs./ft. Wall thickness or gua	in. toft. ge No. SDR 26	
TYPE OF S	SCREEN OF	R PERFORAT	ION MATERIAL:	_7_		_7_PVC	4	10 Asbestos-Cer	10 Asbestos-Cement	
1 Steel 3 Stainless Steel 2 Brass 4 Galvanized Steel				5 Fiberglass 8 R 6 Concrete tile 9 A			P (SR) 11 Other (Specify)			
SCREEN OR PERFORATION OPENINGS ARE: 5 Guazed wrapped 8 Saw cut 11 None (open hole)										
1 Continuous slot 3 Mill slot • 025 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)ft										
SCREEN-PERFORATED INTERVALS: From 50 ft. to 55 ft., From ft. to tt.										
From										
6 GROU	T MATERIA	I · 1 N	eat cement	2 Cement gr	out	3 Rento	nite 4	Other		
									ft. toft.	
			ole contamination:	,			10 Livesto		Abandoned water well	
1 Septic tank 4 Lateral lines				7 Pit privy			11 Fuel st	orage 15	Oil well/Gas well	
	er lines		ess pool	8 Sewage lagoon		oon	12 Fertiliz	•	Other (specify below)	
		rlines 6 Se	eepage pit PHEAST	9 Feedyard				cide storage		
FROM	TO	500.	LITHOLOGIC	2100		EDOM	How many		ATERIAL C	
0	2	FILL 1		LOG		FROM	то	PLUGGING II	VIEHVALS	
2	34		TAN SILTY							
34	55		FINE TO MED.	TAN				77 T		
					-			A.C.		
CONTRA	ACTOR'S O	R LANDOWI	NER'S CERTIFICA 08-03						der my jurisdiction and was	
Water Well (	Contractor's	Licence No	388 Inger pump s	This	s Water We	II Record w	as completed	or (mo/day/yr)9-09	Tel-	
INSTRUCT	IONS: Use type	writer or ball poin	t pen. PLEASE PRESS F	IRMLY and PRINT clea	rly. Please fill in ka, Kansas 666	n blanks, unde	rline or circle the c	orrect answers. Send top three copie 22. Send one to WATER WELL OWN	s to Kansas Department of Health IER and retain one for your	
		ech constructed v			,					