WATER	R WELL RE	CORD	Form WWC	-5	Division of Water Resources; App. No.							
		ATER WELL:	Fraction	.	Section Num			p Number				
Count	y: 5AL	INC	NEYANE 1/4 S	211 if	36	loning (T 14		R 3 W E/W rees, min. of 4 digits)			
	d within city?	n from nearest town or ci	ty street address of w			_	•					
1014 PIECY CT					Latitude:							
2 WAT						Elevation:						
RR#,	St. Address, Bo	x# : 1014 Pie	ecy Ct		Datum:							
City, State, ZIP Code : JALINA, XS 67401					Data Collection Method:							
3 LOCA	3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL											
LOCA	ATION											
	I AN "X" IN	Depth(s) Groundwater Encountered (1)										
SECT	TION BOX:	WELL'S STATIC WATER LEVEL										
	N	Est. Yield gpm: Well water was ft. after hours pumping gpm										
	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well											
w NW	NW NE E 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below											
"	2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well											
sw	SE	***		* 1 . •		**		V	IC			
		Was a chemical/bacteriological sample submitted to Department? Yes										
Sample was submitted												
				r (specify		ASING	1 JOIN 1 5.		Clamped			
2 PVC 4 ABS 7 Fiberglass												
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) SCREEN OR PERFORATION OPENINGS ARE:												
1 Continuous slot 3 Mill slot, 025 Guazed 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												
From												
GRAVEL PACK INTERVALS: From												
rioni												
	JT MATERIA		Cement grout 3 Be	entonite	4 Other							
Grout Int		om <i>Q</i> ft. to			ft. to	ft.	., From		ft. toft.			
	ne nearest sourc Septic tank	e of possible contaminat 4 Lateral lines		10 Livesto	ock nens	13 Ince	ecticide St	orage	16 Other (specify			
	Sewer lines	5 Cess pool		11 Fuel st	•		andoned v	-	below)			
		r lines 6 Seepage pit					well/gas					
	from well?			How man	y feet?	<u>:7</u> .S						
FROM	TO	LITHOLOGIC	LOG	FROM	TO		PLUG	GING INTI	ERVALS			
O O		ILL DIET										
3		LAY TAP SIL			+							
19	54 S	AND FINE TO A	LU IAN									
				-								
				T								
									1 (2)			
7 CONT	RACTOR'S O	R LANDOWNER'S CI	ERTIFICATION: 1	his water	well was (1)	constr	icted_(2)	reconstruct	ed, or (3) plugged			
TONTRACTOR'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)												
under the	vater well Cont	of Pisting Crass	YMP This water	well Ked	(signature	Picted.		y y car)	······································			
INSTRUC'	TIONS: Use types	writer or ball point pen. PLEA	ISE PRESS FIRMLY and	<i>PRINT</i> clear	ly. Please fill ir	n blanks.	underline o	r circle the co	orrect answers. Send top			
three copies	s to Kansas Departr	nent of Health and Environmen	nt, Bureau of Water, Geol	ogy Section,	1000 SW Jackso	on St., Si	uite 420, To	peka, Kansas	66612-1367. Telephone			
/03-296-33	22. Send one	W WAIER WELL OWN	785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at									

KSA 82a-1212

http://www.kdhe.state.ks.us/geo/waterwells.