WATER WELL RECOR	(D	Form WWC-	5	Division of Wat	er Resources; App. No.∟		
1 LOCATION OF WATER	WELL:	Fraction DW/4 SF 1/4 J	C 1/4 S	ection Number	Township Number T /4/ S		
County: SALINE Distance and direction from	n nearest town or city	street address of we	ll if G		g Systems (decimal deg		
located within city? 2927 TACK CIECLE Latitude: Longitude: Elevation:							
2927 VALK CIECLE				Longitude:			
2 WATER WELL OWNER	LLADAY	E	levation:				
2 WATER WELL OWNER: CHEIS OF RR#, St. Address, Box # 2927		CK CIECUL	D	oatum:	evation:		
City, State, ZIP Code	CALINA	X1 60	1401 D	ata Collection	Method:		
City, State, ZIP Code : JALIWA KS 47401 Data Collection Method: 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL							
LOCATION			.				
WITH AN "X" IN Dep	pth(s) Groundwater I	Encountered (1)	21	. ft. (2)	ft. (3)	ft.	
SECTION BOX: WE	ELL'S STATIC WAT	TER LEVEL 2 .1	ft. be	elow land surfac	e measured on mo/day	/yr D8-16- D7	
N	Tump test data. Wen water was						
Est. Yieldgpm: Well water wasft. after hours pumpinggpm							
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well							
W A E I 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							
Was a chemical/bacteriological sample submitted to Department? Yes No Y; If yes, mo/day/yrs							
Sample was submitted							
Sample was submitted							
5 TYPE OF CASING USEL): 5 Wrought Ir	on 8 Conc	rete tile	CASIN	G JOINTS: Glued		
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded							
2 PVC 4 ABS 7 Fiberglass Threaded Blank casing diameter 5							
Casing height above land surface							
TYPE OF SCREEN OR PERI				s./it. Wall til	tokness of gaage 110.		
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)							
2 Brass 4 Galvania	zed Steal 6 Concr	ete tile 8 RM (SR) 10 As	sbestos-Cement	12 None used (open	hole)	
SCREEN OR PERFORATION	N OPENINGS ARE:						
1 Continuous slot 3 Mill slot 103-3 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							
From							
From							
F10III It. to It., F10III It. to It.							
6 GROUT MATERIAL: Grout Intervals: From	1 Neat cement 2 C	ement grout 3 Ber	ntonite 4	Other			
Grout Intervals: From	ft. to	57 ft., From	ft	. to	ft., From	ft. toft.	
What is the nearest source of j	possible contamination	on:					
1 Septic tank	4 Lateral lines 7		0 Livestoc		secticide Storage	16 Other (specify	
2 Sewer lines			1 Fuel stor	•	bandoned water well	below)	
3 Watertight sewer line		9 Feedyard 1	2 Fertilize	r Storage 15 C	Oil well/gas well		
Direction from well?							
FROM TO	LITHOLOGIC	LOG	FROM	TO	PLUGGING INT	ERVALS	
O 4 FILL							
	UDY LOOM						
	Y TAN F	RM					
27 56 SAM	UN FINE T	DINED IAN					
54 57 CLA	y GRAY H	AED					
<u> </u>							
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) 2.5 2 2 2 2 2 2 2							
Kansas Water Well Contractor's License No 2.11 This Water Well Record was completed on (mo/day/year)							
under the husiness name of	DECTION S	DILMA (1)	משאות ליים. שאונו ליי	(signature)	n. 000		
under the business name of INSTRUCTIONS: Use typewriter	or ball point pen. PLEAS	SE PRESS FIRMLY and P	RINT clearly	. Please fill in blan	ks, underline or circle the	orrect answers. Send ton	
three copies to Kansas Department o	of Health and Environment	t, Bureau of Water, Geolo	gy Section, 1	000 SW Jackson St.	, Suité 420, Topeka, Kansa	s 66612-1367. Telephone	
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 http://www.kdheks.gov/waterwell/index.html.							
,p., water well/like							