	R WELI				Form WWC-5			Division of Water Resources; App. No.			
1 LOCATION OF WATER WELL: County: A LIPO E			Fraction NW1/4	onswyse	- 1/4	Section N		Township Number T S	Range Number R 3 W E/W		
Dista	ince and di	rection 1	from nearest toy	vn or city street :	address of wel	l if			Systems (decimal deg		
locat	ed within c	eity?	V4/1/ 1	BINDA	1		Latitude:				
		_ &	8772	JIN SA A	ANDE		Longitud	e:			
2 WA	TER WEI	LL OW	NER: NOR	BIRT L Y LINDA	AUE		Elevation	ı:		A STORAGE CONTRACTOR OF THE STORAGE CONTRACT	
City	, St. Addre , State, ZIF	ess, Box P.Code	# 2841	y LINDSA	24702		Datum:				
				INA, X			Data Col				
1	CATE WE			COMPLETED							
1	CATION	, IN	Denth(s) Grour	dwater Encount	ered (1)	19	£.	(2)	ft (3)	£.	
1	WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered (1)										
N Pump test data: Well water was							ft. after	/	hours pumping	25 gpm	
		\neg \mid	Est. Yield	gpm: Well	water was		ft. after		hours pumping	gpm	
- NV	v NE -	_							conditioning 11 Inj		
w											
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well											
Was a chemical/bacteriological sample submitted to Department? Yes											
Was a chemical/bacteriological sample submitted to Department? Yes											
Sample was submitted											
5 TVPI	E OF CAS	ING US	SED: 5 Wi	rought Iron	8 Concre	ete tile		CASING	G JOINTS: Glued	Clamped	
1	Steel			sbestos-Cement						Clamped	
2	PVC	4 ARS	7 Fil	perolace					Threaded		
Blank ca	asing diam	eter	in. to	.5.4 ft., D	Diameter	i	n. to	ft.,	Diameter	in. to .,ft.	
Blank casing diameter 5 in. to 5.4. ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 20 in., Weight 160lbs./ft. Wall thickness or guage No. 5.2. 36											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
1 Steel 3 Stainless Steel 5 Fiberglass ZPVC 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 225 5 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)											
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From											
From											
From											
				From	п. ю		π.,	From	nt. to	It.	
6 GRO	UT MATI	ERIAL:	1 Neat ceme	ent 2 Cement s	grout 3 Bent	tonite	4 Other		• • • • • • • • • • • • • • • • • • • •		
Grout In		Fron	n Ø ft	. to . . 22 `	ft., From		ft. to	f	t., From	ft. toft.	
			of possible cont								
	Septic tank			l lines 7 Pit priv	•		ock pens			16 Other (specify	
	Sewer line		5 Cess po			Fuel st			pandoned water well	below)	
3	Watertight	sewer I	ines_ 6 Seepag	ge pit 9 Feedy			zer storage				
FROM	n from well	11 <i>?</i>		LOGIC LOG	He	ow man FROM	y feet?	<i>Co</i> .	PLUGGING INT		
O	2	FIL		LOGIC LOG		FROM	OT		PLUGGING IN I	ERVALS	
2	12		AY TAK	D BILT	J						
2	53		NOS FIN	DE TO M	UN TAL	5					
/6		J.,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
				1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-							
								4.			
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) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year) and the contractor's License No. This Water Well Record was completed on (mo/day/year)											
under m	y jurisdicti	on and v	was completed of	on (mo/day/year)	This West Time	Cond Vall D	this record	is true	to the best of my know	vledge and belief.	
Kansas	water wel	nama of	f Dicense N	WER Pu	inis water v	ven Ke	cora was co	pupiere	on (mo/day/yyar)	O DITTER	
INSTRUC	CTIONS: U	name 01 se tvpewri	ter or ball point ne	n. <i>PLEASE PRESS</i>	FIRMLY and PR	INT clear	y (Signatur dv. Please fil	l in blanks	s, underline or circle the co	prest answers Send ton	
three copi	es to Kansas	Departme	nt of Health and En	ivironment, Bureau o	of Water, Geolog	y Section	, 1000 SW Jac	ckson St.,	Suite 420, Topeka, Kansas	66612-1367. Telephone	
three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 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.											
nttp://wwv	w.kaneks.gov	waterwel	//index.ntml.								