WATER	R WELL	RECO	RD	Form WWC	-5	Division of	Water	Resources; App. No.	
1 LOCA	ATION O	F WATE	R WELL:	Fraction		Section Numb		Township Number	
County: SALIBE Distance and direction from nearest town o			3E	W 1/4 SE 1/4 (SE 1/4	36		T // S	R 3W E/W
located within city?						Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude:			
Tocate	d within Ci	" loc	33 JOAN	ic LANG	ر.	_			
2 WAT	TER WEL	L OWNE	R. RELATER	MAI		Elevation:			
RR#,	St. Addres	ss, Box#	1027 100	MAI ANIF LANE		Datum:			
City,	State, ZIP	Code	SALINA	96 624	101	Data Collect	ion N	Method:	
	ATE WEL	L'S 4	DEPTH OF COM	PLETED WELL		o.D			
	ATION	_			20				
	WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered (1)								
SECI	SECTION BOX: WELL'S STATIC WATER LEVEL. 20ft. below land surface measured on mo/day/yr 20								
		$\neg \mid_{\mathbf{E}^{s}}$						hours pumping	
- NW	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well								
w I	W								
	2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well								
sw	Was a chemical/bacteriological sample submitted to Department? Yes No								
Sample was submitted									
S									
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped									
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded									
2 PVC 4 ABS 7 Fiberglass Threaded Blank casing diameter in to ft., Diameter in to ft., Diameter in to ft. Casing height above land surface in, Weight 160 lbs./ft. Wall thickness or guage No. 100 lbs./ft.									
Blank casing diameter									
Casing height above land surface									
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 19265 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)									
From									
GRAVEL PACK INTERVALS: From									
From									
CODOME MATERIAL AND A COLOR OF A									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other									
What is the nearest source of possible contamination:									
1.5	Septic tank		4 Lateral lines		10 Lives	stock pens 1	3 Ins	secticide storage	16 Other (specify
	Sewer lines		5 Cess pool	8 Sewage lagoon	11 Fuel	-		pandoned water well	below)
	Watertight			9 Feedyard		-		l well/gas well	
FROM	n from wel	<u> 1?</u>	LITHOLOGI	CLOG	FRO!	-	• • • • • • •	PLUGGING INT	
D	4	FILL	DIET	C LOG	FROI	VI 10		PLUGGING INT	ERVALS
4	20		TAN SILTY	,	 				
30	28		TAN						
28	40	JANI	FINE TO 1	NED TAN					•
60		CLA	Y GEAY	•					
				•					
					-				
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) Q.B.: QQ.: Q.P. and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. Q.P. This Water Well Record was completed on (mo/day/year) Q.B.: Q.D.									
Kansas V	Water Well	l Contract	or's License No. 🥨	7.4. This Wate	er Well R	ecord was comp	eted	l on (mo/da y/ year) 🥰	4-20-05
under th	e business	name of	PESTINGEE	PHMP SEE	PIEK	by (signature)	ماب	uf / West	AS ?
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top 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									
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KSA 82a-1212

Visit us at

785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.

http://www.kdheks.gov/waterwell/index.html.