		 	WELL RECO	רטוווו אי					
1 LOCATION OF WATE		Fraction 1/4	SE 1/2	NW 1/4	Section Number	1	p Number	T 3-	Number
County: SALINE Distance and direction f	rom nearest town o	, ,		, , , , , , , , , , , , , , , , , , , ,		<u> </u>	4— s	R 3	₹ W
	Jeratur							MW	-12
2 WATER WELL OWN	IER: Umon	PACIT	ic KA	regard					
RR#, St. Address, Box	#			0		Board	of Agriculture, [Division of Wa	ter Resource
City, State, ZIP Code	: Onli	UA, KS	-			Applic	ation Number:		
LOCATE WELL'S LO	DOV				ft. ELEV/ ft.				
 					ft. below land su				
† 1 i l	; \v*								
NW,	- NE	•							
! ^					ර ft. i				
* w +	t								π.
ž W	! W	ELL WATER TO			water supply	8 Air conditio	•	Injection well	E 1
1 sw	SE	1 Domestic	3 Feedl		ld water supply			Other (Specify	
		2 Irrigation	4 Indus		and garden only		X		
	Wa	as a chemical/b	acteriological	sample submitted	I to Department? \				
<u> </u>	mit	tted			W	ater Well Disini		No	
5 TYPE OF BLANK CA	ASING USED:		5 Wrought in		Concrete tile		JOINTS: Glued	d Clar	nped
1 Steel	3 RMP (SR)		6 Asbestos-0	Cement 9 C	Other (specify belo	w)		ed	
(¹ 2) PVC	4 ABS	76	7 Fiberglass					aded	
Blank casing diameter .					in. to	ft., Dia		in. to	<i></i> ft.
Casing height above lar	nd surface	. <i>D</i>	in., weight	• <i></i>	lbs	./ft. Wall thickn	ess or gauge N	0	
TYPE OF SCREEN OR					ZPVC	10	Asbestos-ceme	ent	
1 Steel	3 Stainless st	eel	5 Fiberglass		8 RMP (SR)	11	Other (specify)		
2 Brass	4 Galvanized	steel	6 Concrete t	ile	9 ABS	12	None used (op	en hole)	
SCREEN OR PERFORA	ATION OPENINGS	ARE:		5 Gauzed wrapp	ed	8 Saw cut		11 None (o	oen hole)
1 Continuous slot	(3 N)iils	slot		6 Wire wrapped		9 Drilled ho	les		
2 Louvered shutte	r 4 Key p	punched		7 Torch cut ,		10 Other (sp	ecify)		
SCREEN-PERFORATE		From	<u></u>	ft. to) ft., Fro	om	ft. t	o	
		From		ft. to	ft., Fro	om	ft. t	0	ft.
GRAVEL PAC	K INTERVALS:	From			ft., Fro				
	_	From		ft. to	ft., Fro		ft. t		ft.
6 GROUT MATERIAL:	(1) Neat cem	nent 2	2 Cement gro	ut(3	entonite4	Other			
Grout Intervals: From		to2.1	ft., From	m 2. (. ft. to Z.3	ft., From	n	ft. to	
What is the nearest sou	irce of possible con	ntamination:			10 Live	stock pens	14 A	bandoned wa	ter well
1 Septic tank	4 Lateral li	ines	7 Pit	privy	11 Fuel	storage	15 O	il well/Gas we	el l
2 Sewer lines 5 Cess pool			8 Sewage lagoon		12 Ferti	12 Fertilizer storage		16 Other (specify below)	
	r lines 6 Seepage		9 Fee			cticide storage		NONE	
Direction from well?				,		any feet?		•	
FROM TO		LITHOLOGIC L	LOG	FRO			PLUGGING I	NTERVALS	
10 3	FU	,							
3 20	Silter 11	lan							
20 40 0	1/4mc \$ 51	Hay Son	nd						
	,								
†									
								ONA!	22
				-			1,0		7.49/
		***************************************					- 1507	CAE 14 1. 1.31.)	121/20
							<u> </u>	3 PG 1514	1 8191
							1~~/	8	- 1 51
								NI	- 2
								7. 3	
					1			100	_/_/
7 CONTRACTOR'S O	R LANDOWNER'S	CERTIFICATION	ON: This wate	er well was/(1) co	onstructed, (2) rec	onstructed, or	(3) plugged und	e my je sdio	tion and was
completed on (mo/day/y	1/1	1-75					e best of my	eWledge and	palie Kansas
Water Well Contractor's	•	,102		Water Well Reco	rd was completed			> COUL	
under the business nam		Loyne,	On-		by (signa	~ ~ / / / / /		while	<i>'</i>
INSTRUCTIONS: Use typ		. PLEASE PRESS FI	RMLY and PRINT	clearly. Please fill in b	planks, underline or circ	le the correct answ	ers. Send top three	copies to Kansas	Department
of Health and Environme	nt Bureau of Water Ton	neka Kansas 66620	-0001 Telephone	913-296-5545 Send	one to WATER WELL (OWNER and retain	one for your records		