			WELL RECORD	Form WVVC-	5 KSA 828			
LOCATION OF W	/ATER WELL:	Fraction		Se	ction Number	, -	Range Number	
County: SALTNE	ion from nearest town	SW 1/4			23	] T 14 S	R3E(W)	
Distance and directi	on from nearest town 524 MON		ress of Well IT locat	ea within city?				
WATER WELL O	OWNER:WAYNE GAR							
	Box # :524 MONTE					Board of Agriculture	Division of Water Resources	
City, State, ZIP Cod	1							
LOCATE WELL'S	LOCATION WITH 4		APLETED WELL	60	ft FLEVA	Application Number:		
TYPE OF BLANK  1 Steel  2 PVC  Blank casing diamet  Casing height above  TYPE OF SCREEN  1 Steel  2 Brass  SCREEN OR PERF  1 Continuous	ION BOX:    X	epth(s) Groundwa ELL'S STATIC W Pump to st. Yield	ter Encountered ATER LEVEL est data: Well wat gpm: Well wat r. 8½ in. to BE USED AS: 3 Feedlot 4 Industrial steriological sample Wrought iron Asbestos-Cement Fiberglass ft., Dia , weight 160 Fiberglass Concrete tile 5 Gaux 6 Wire	ter was ter was 60. 5 Public wat 6 Oil field way 7 Lawn and submitted to E 8 Conce 9 Other in to 1 P 8 Right 9 AE 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	below land surfit, a ft., a ft., a ft., a ft., a ft., a ft., ar supply atter supply garden only bepartment? Y Warete tile (specify below 1	2	pumping 30 gpm pumping gpm pumping gpm in to ft.  I Injection well Cother (Specify below)  S, mo/day/yr sample was sub- X No ed X Clamped ded in to ft. No SDR 26 nent y) 11 None (open hole)	
2 Louvered sh		punched	7 Torc	• •				
SCREEN-PERFORA	<u>-</u>				ftFro	m	toft.	
GROUT MATERI Grout Intervals: F		From NONE From to22	ft. to .  ft. to  Cement grout	3 Bent	ft., Fro ft., Fro priite 4 to	m ft.  m ft.  Other	to	
2 Sewer lines 5 Cess pool			8 Sewage lagoon			12 Fertilizer storage 16 Other (specify below)		
	ewer lines 6 Seepage		9 Feedyard	,00.,		cticide storage		
Direction from well?	·	F	- · <b>-</b>		How ma			
FROM TO		LITHOLOGIC LO	G	FROM	ТО		INTERVALS	
0   3	TOP SOIL							
3 40	CLAY							
40 60	MED. SAND, 8	GRAVEL			<u> </u>			
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CONTRACTOR'S	OR LANDOWNER'S	CERTIFICATION	: This water well v	vas (1) constru	cted_(2) reco	enstructed, or (3) plugged ur	iden my jurisdiction and was	
completed on (mo/da	<sub>ay/year)</sub> 6-16-8						nowledge and belief. Kansas	
Nater Well Contract	or's License No. 388	}	This Water V	Vell Record w	as completed	on (mo/day/yr) 6/16-99	V to Const. Raisas	
under the business i	T)111 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1	GER PUMP SI	ERVICE	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	by (signa		Teleson 1	
				lloaco fill in historia		the correct answers. Send top three	conion to Koden Constitution	
of Health and Enviro	o typesmiles of their point pen. Imment, Bureau of Water Prot	ection, Topeka, Kansas	66620-7320. Telephone:	: 913-296-5514. Se	nd one to WATER	The correct answers. Seno top three	your records.	