1			WELL RECORD	FORM VV		028-1212			
1 LOCATION OF WATE		Fraction	/	11-	Section Numb		Number	Range N	- :M
County: SALIN			5W 1/4 /			T	14 (S)	R	3 EW
Distance and direction fr		1		ated within o	city?				_
		Wesle							
2 WATER WELL OWN	, ,		canfe	2					
RR#, St. Address, Box	#: 209	73, We					of Agriculture, D	Division of Wate	r Resource
City, State, ZIP Code	5.A	-//wa	KANS	145	675	40 Applica	tion Number:		
LOCATE WELL'S LO	CATION WITH 4	DEPTH OF CO				VATION:	./235.		
AN "X" IN SECTION						ft. 2			
7						surface measured			
1	i     '''					t. after			
NW -	- NE						•		-
!!!.						t. after			
* w   - <del>                                  </del>						t., and5			
_	!   W	ELL WATER TO			water supply		•	njection well	
sw	- SE	1 Domestic	3 Feedlot		d water supply	-		Other (Specify I	•
		2 Irrigation	4 Industrial			y 10 Monitoring v	• •		
<b>↓ <u> </u></b>	\ Wi	as a chemical/ba	cteriological samp	le submitted	to Department	? YesNo	<b>X</b> ; If yes,	mo/day/yr sam	ple was su
<u> </u>		tted				Water Well Disinfe	cted? Yes X	No	
5 TYPE OF BLANK CA	SING USED:		Wrought iron	8 C	oncrete tile	CASING	JOINTS: Glued	Clamp	ed
1 Steel	3 RMP (SR)	6	Asbestos-Ceme	nt 9 C	ther (specify be	elow)	Welde	ed	
<b>O</b> vc	4 ABS		' Fiberglass				Threa	ded	
Blank casing diameter .	<b></b> in.	to 43.1	<del>7</del> ft., Dia	<i>.</i> , i	n. to	ft., Dia	i	n. to	ft
Casing height above land	d surface								
TYPE OF SCREEN OR			, <b>.</b>		PVC		Asbestos-ceme	-	. 6
1 Steel	3 Stainless st		Fiberglass	~	RMP (SR)		Other (specify)		
2 Brass	4 Galvanized	-	Concrete tile		ABS		None used (ope		
SCREEN OR PERFORA							• •	•	- hala\
1 Continuous slot	Mill s			uzed wrapp	eu	8 Saw cut		11 None (ope	n noie)
				re wrapped		9 Drilled hole			
2 Louvered shutter		punched	. ,,	rch cut	1/2		cify)		
SCREEN-PERFORATED	INTERVALS:			_		From			
05		From	ft. to	وننز	ft., F	From	ft. to	)	<i></i>
GRAVEL PACE	(INTERVALS:	From 22	<del>-</del> ft. to	<b>Э</b> э		From	ft. to	)	
	_	From	ft. to	·	ft., F	rom	ft. to	)	ft
6 GROUT MATERIAL:	1 eat cem		Cement grout		3entonite	4 Other			
Grout Intervals: From.	<b>;</b> ft.	to	ft., From		ft. to	ft., From		. ft. to	
What is the nearest sour	ce of possible cor	ntamination:			10 Liv	estock pens	14 Ab	andoned water	well
<ol> <li>Septic tank</li> </ol>	4 Lateral li	ines	7 Pit privy		11 Fu	iel storage	15 Oi	well/Gas well	
2 Sewer lines	5 Cess po	ol	8 Sewage I	agoon	12 Fe	ertilizer storage	16 Ot	her (specify be	low)
3 Watertight sewer	lines 6 Seepage	pit	9 Feedyard	-		secticide storage			
Direction from well?	JOUTI		AST			many feet?	754	25	
FROM TO		LITHOLOGIC LC		FRO		1001.	PLUGGING IN	TERVALS	
0' 4' (	Compac	red d		UT					
	75;	175						7	
4' 12'	clav	Brow	\N\						
		(65.5							
12' 17'	tine .	SAND							
	3 /								
17' 35'	Fine 5	AND 4	clar						
17 33	mira	Bro							
351 391	Wixea		sw <sub>N</sub>						
35' 39'	Fine '	SAND							
201 411	0104	(B. V							
39' 41'	clay	(Dark	grey)						
			•						
41' 53/2'	Mediun	n to	coarse						
	SAND	AND (	Gravel						
Z CONTRACTORIO CO	I ANDOMASIEDIO	CERTIFICATION	l. Thist		- L (2)		N = hue = = d	w was broke that	
7 CONTRACTOR'S OR		CERTIFICATION	ı: ınıs water well	was (1) cor					
completed on (mo/day/ye						cord is true to the	best of my kno	wiedge and bel	ief. Kansas
Water Well Contractor's	/V - / -	523,.				ed on (mo/day/yr)		· · · · · · · · · · · · · · · · · · ·	1
under the business name	of ///4_[	o wel	L Servi	رو	by (sig	nature)	thew.	Lou	y
INSTRUCTIONS: Use type	writer or ball point pen.	PLEASE PRESS FIRM	MLY and PRINT clearly.	Please fill in bl	anks, underline or o	ircle the correct answer	s. Send top three c	opies to Kansas De	partment
of Health and Environmen	t, Bureau of Water, Top	eka, Kansas 66620-0	001. Telephone: 913-29	96-5545. Send o	one to WATER WELL	OWNER and retain or	e for your records.		