				R WELL RECORD	Form WWC-5		2a-1212			
1 LOCATI County:	ON OF WAT		Fraction SW 1/4	SW 14 SW		ction Numbe 25	r Township N T 14	Number S	Range Number R 3 E/W	
Distance a	and direction	from nearest to	wn or city street a 9th & MA	address of well if locate AGNOLIA	ed within city?		•			
2 WATE	R WELL OW	NER: NATION	AL BANK OF					·		
RR#. St.	Address. Box	(# : 100 S.	SANTA FE				Board of	Agriculture.	Division of Water Resources	
City. State	. ZIP Code	SALINA	KS. 6740:	1				n Number:		
3 LOCAT	F WFIL'S I	OCATION WITH	A DEPTH OF C	COMPLETED WELL	57	# ELEV				
AN "X"	IN SECTION	BOX:	Depth(s) Ground	water Encountered	$123\frac{1}{2}$	<i>.</i> ft.	2	ft. 3		
Ī .	NW	NE	Pum	p test data: Well wat	erwas?	アクララ ft.	after1	. hours pu	12-16-91 Imping gpm Imping gpm	
<u>'</u>	! !		Bore Hole Diam	eter 9 in to	57	IL. 44	aner	. nours pu	toft.	
. w F		E		TO BE USED AS:	5 Public wate		8 Air conditioning			
-	i		1 Domestic						Injection well Other (Specify below)	
-	SW	SE	2 Irrigation	4 Industrial					Other (Specify below)	
	s !	! !								
1			mitted	bacteriological sample	Submitted to D		resNo		, mo/day/yr sample was sub- X No	
5 TYPE	OF BLANK C	ASING USED:		5 Wrought iron		ete tile		DINTS: Glue	d . X Clamped	
1 St		3 RMP (S	SR)	6 Asbestos-Cement					ed	
_2 P\		4 ABS		7 Fiberglass				Threa	aded	
Blank casi	ing diameter		.in. to 47.	ft., Dia	in. to		ft., Dia		in. to ft.	
Casing he	ight above la	ınd surface	12	.in., weight 16	6 0	lbs	./ft. Wall thickness	or gauge N	o. SDR 26	
		R PERFORATIO			_ 7 PV			bestos-ceme		
1 Steel 3 Stainless steel 5 Fiberglass								her (specify)		
				6 Concrete tile	-			12 None used (open hole)		
SCREEN OR PERFORATION OPENINGS ARE: 5 Gauze									11 None (open hole)	
1 Cc	ontinuous slo	t 3 M	Mill slot .030	6 Wire	wrapped		9 Drilled holes		(,	
	uvered shutt		(ey punched	7 Torc	• •			(ک)		
		D INTERVALS:				ft Fr			o	
CONLECT										
	SBAVEL PAG	CK INTERVALS:	From	3 3	57	# Er	om		o	
. `	SI MULL I M	on million	From							
6 GBOLD	MATERIAL	: 1 Neat		2 Cement grout						
Grout Inte	nyale: From	n 2				to.	# Erom		ft. to	
		urce of possible								
		•		7 Pit privy	10 Livestock per		•	14 Abandoned water well		
1 Septic tank 4 Lateral lines				8 Sewage lag		11 Fuel storage		15 Oil well/Gas well		
2 Sewer lines 5 Cess p			·	joon	12 Fertilizer storage			16 Other (specify below)		
	-	er lines 6 Seep					cticide storage	12		
Direction 1		NORT		100			any feet?	LUGGING I	NTEDWALO	
FROM	то	TOP SOI	LITHOLOGIC	LOG	FROM	то .	<u></u>	LUGGING I	NIEHVALS	
0	2						1072			
2	24	CLAY SO		- 49			10.00		1.00	
24	42		NDY TAN	1						
42	57	SAND &	SMALL GRAVE	<u> </u>	_					
										
							1000			
							1-11-11			
7 CONT				ONL This water well w	.o. (1) constru	-11 (0)	constructed or (3)	alugged upo		
T COMI	1VC.1U.0.6.	ND I ΔΚΙΓΥΓΛΙΚΙΚΙ⊑Ι	R'S CERTIFICATI	()N' INIC WATER WE!! "		CIAO. IVI PAR	anisituane or i.e.		ier my ilirisaiction and was i	
complete d	on (mo/dow	OR LANDOWNE	12-16-91	ON: This water well v	as (1) constru	and this rec	ord is true to the be	plugged und set of my kn	ler my jurisdiction and was	
	on (mo/day/	year)	12-16-91.			and this rec	ord ie true to the be	est of my kn	owledge and belief. Kansas	
Water Wel	on (mo/day/	year)	12-16-91.	This Water V		and this rec	ord is true to the boom (mo/stay yr)	est of my kn	pwiedge and belief. Kansas	

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 Kapsas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.