		WATER	R WELL RECORD	Form WWC-5	KSA 82a-	1212		
LOCATION OF V	ATER WELL:	Fraction		Sec	ction Number	Township Nu	mber	Range Number
County: Saline		NW 1/4	SW 14 NW		36	T 14	<u> </u>	<u>IR</u> 3 E/W/
		or city street ad	dress of well if located	d within city?				
2718 н	ighland	a d al man						
WATER WELL	OWNERHarold We	eluman						
	Box # 2718 High	niana Za 67401				•		Division of Water Resources
City, State, ZIP Coc						Application		
LOCATE WELL'S AN "X" IN SECT								
!	w	ELL'S STATIC	WATER LEVEL2	2 ft. b	elow land surf	ace measured on	mo/day/yr	.5-12-88
- NW -	NE	Pump	test data: Well wate	r was50	0 ft. a ft	ter	hours pur	mping 25 gpm
X- \\\\ -	E	st. Yield25.	gpm: Well wate	rwas	ft. aft	ter	hours pur	mping gpm
w	, B	ore Hole Diamet	er8½in. to.	· · · · · 55 · · ·		nd	in.	to
w	! w	ELL WATER TO		5 Public water		B Air conditioning		Injection well
sw _	%	1 Domestic				_		Other (Specify below)
	7 7	2 Irrigation	4 Industrial	7 Lawn and	garden only 1	0 Observation well	٠	
	w	/as a chemical/ba	acteriological sample s	ubmitted to D	epartment? Ye	sNo	; If yes,	mo/day/yr sample was sub
		itted			Wate	er Well Disinfected		
	CASING USED:		5 Wrought iron	8 Concre				I X Clamped
1 Steel	3 RMP (SR)		6 Asbestos-Cement	9 Other	(specify below)	Welde	ed
2 PVC	5 4 ABS	48	7 Fiberglass				Threa	ded
lank casing diame	er	. to	ft., Dia 160	in. to		ft., Dia	i	ded
asing height above	land surface		n., weight					
	OR PERFORATION I			7 PV			stos-ceme	
1 Steel	3 Stainless s		5 Fiberglass					
2 Brass	4 Galvanized		6 Concrete tile	9 AB	_		used (ope	•
	ORATION OPENINGS			d wrapped		8 Saw cut		11 None (open hole)
1 Continuous				vrapped		9 Drilled holes		
2 Louvered sh	,	punched From 48	7 Torch	cut		10 Other (specify)		
SCHEEN-PERFORA	TED INTERVALS:	From			ft., From)	ft. to)
ODAVEL 1	NACK INTERVALO							o
GHAVEL I	PACK INTERVALS:						_	o
GROUT MATERI	Al. d Nashasa	From			ft., From			
,			Cement grout					
	source of possible co			IL.	10 Livesto			pandoned water well
1 Septic tank	4 Lateral		7 Pit privy					
2 Sewer lines 5 Cess pool			8 Sewage lagoon		11 Fuel storage12 Fertilizer storage		15 Oil well/Gas well 16 Other (specify below)	
	ewer lines 6 Seepage		9 Feedyard	011		-1-1		
Direction from well?	North	о ри	3 i eeuyaru		How man	~ ~~		
FROM TO		LITHOLOGIC L	OG	FROM	TO TO	7 10011	ITHOLOG	C LOG
1 3	Top Soil							
3 11	Clav							
11 30	Sand							
30 31	Clay							
31 55	Sand With	Clav Laver	S					
		**						
		:						
CONTRACTORS	OR LANDOWNER'S	CERTIFICATIO	Al. This water well we	. (1)	eted (2) recon	entructed or (2) als	agand und	or my juriodiction and was
	ay/year)5-12-6							er my jurisdiction and was wedge and belief. Kansas
			This Water W				5- 4 3-8	88/ /
	ors license No name of Pestinge:			on necord wa		ing auf	11/	
INSTRUCTIONS: Us	e typewriter or ball point pe	en. PLEASE PRESS	FIRMLY and PRINT clear	rly. Please fill in	blanks, underline	or circle the correct a	swers. Sen	top three copies to Kansas
Department of Health	and Environment, Bureau	of Water Protection	on, Topeka, Kansas 66620	-7320, Telephor	ne: 913-862-9360	Send one to WATER	WELL OW	NER and retain one for your