· ·	WATE	R WELL RECORD	Form WWC-5	KSA 82	<del></del>		•
LOCATION OF WATER WELL: county: SALTNE	Fraction SE 1/4	SW 1/4 NW	Sect	on Number 34	Township Nu	ımber S	Range Number
Distance and direction from nearest					1	<u> </u>	L/VV
		WEST OF BAVA					
	ORGE McCORMIC						
	22 S. GEISSLE VARIA, KS. 67					•	Division of Water Resource
City, State, ZIP Code : BA	401			Application Number: ATION:231			
LOCATE WELL'S LOCATION WI' AN "X" IN SECTION BOX:	THI4 DEPTH OF C	OMPLETED WELL	.40 22	. ft. ELEV	ATION: ~2		
TYPE OF BLANK CASING USEI  1 Steel 3 RMP  2 PVC 4 ABS  Casing height above land surface.	WELL'S STATIC Pump Est. Yield Bore Hole Diame WELL WATER T Domestic 2 Irrigation Was a chemical/I mitted D: (SR)	WATER LEVEL	22 ft. be r was	low land suftft., supply er supply arden only partment? \( \text{W} \) te tile specify belo	after	mo/day/yr hours pu hours puin 11 12; If yes d? Yes NTS: Glue Welc Threor gauge N	d Clamped
TYPE OF SCREEN OR PERFORA		, ,	7 PV			estos-cem	
1 Steel 3 Stain	less steel	5 Fiberglass	8 RM	P (SR)	11 Oth	er (specify	)
2 Brass 4 Galvanized steel		6 Concrete tile 9 ABS			12 Nor	ne used (o <sub>l</sub>	•
SCREEN OR PERFORATION OPE	5 Gauz	5 Gauzed wrapped				11 None (open hole)	
1 Continuous slot	3 Mill slot		wrapped		9 Drilled holes		
	Key punched	7 Torch					
SCREEN-PERFORATED INTERVA							to
on one and areas. The address of the second							toft
GRAVEL PACK INTERVA	(~~						toft to ft
	at cement	2 Cement grout	3 Bento	nite			
		ft., From	ft.	to	ft., From		ft. to
What is the nearest source of poss	ble contamination:			10 Live	estock pens	14 /	Abandoned water well
1 Septic tank 4 Lateral lines		7 Pit privy		11 Fuel storage			Oil well/Gas well
2 Sewer lines 5 Cess pool		8 Sewage lagoon		12 Fertilizer storage		16 (	Other (specify below)
3 Watertight sewer lines 6 Seepage pit		3			3 Insecticide storage		
Direction from well?			2000		any feet?	HOOING	INTERVALS
FROM TO	LITHOLOGIC	LOG	FROM	то 22	CHLorinat		
	Marin Marin Villa (1994)	. 16° family family framework a measure of a	40		CLAY	ed Dun	J
		Alanda da Alanda	22	15 3	NEAT CEME	NI TI	
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		1900   Parama mahara ar/hara r/ 1904   1915   1916					
	The state of the s						
						4 200 200 200 200 200 200 200 200 200 20	The state of the s
7 CONTRACTOR'S OR LANDOV	/NER'S CERTIFICAT	TION: This water well v	vas (1) constru	i cted, (2) re	constructed, or (3)	plugged u	nder my jurisdiction and wa
completed on (mo/day/year)	.8-1-90					est of my (	nowledge and belief. Kansa
Water Well Contractor's License Number the business name of	5. 300 ESTINGER PUMI	This Water \ SERVICE	Vell Record wa	s complete by (sig	1 1 2	UA	Fexton
INSTRUCTIONS: Use typewriter or ball			Please fill in blanks		The state of the s	Send top thre	e copies to Kapsas Department

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Karyas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.