|                                  |   |  | LL RECORD   | orm WWC-5  | KSA 82a  |                    |                                    |  |
|----------------------------------|---|--|---|--|--|--------------------|------------------------------------|--|
| Journy.                          | INE   |  | e ¼ se  | 1/4  | tion Number<br>17  | Township<br>T 15   |                                    | Range Number<br>R 2 E/W  |
| istance and direction            | on from nearest town or   | city street address 2625 E. ME                                   |   | within city?                                     |  |                    |                                    |  |
| WATER WELL C                     | WNER: SCOTT NI  |  |   | ······································           |  |                    |                                    |  |
| R#, St. Address, E               |   | MENTOR RD.   |   |  |  | Board of           | Agriculture.                       | Division of Water Resource   |
| ity, State, ZIP Cod              | e : <b>E</b> SSARIA,  | KS. 67416  |   |  |  | Applicati          | on Number:                         |  |
| LOCATE WELL'S<br>AN "X" IN SECTI | ON BOX: Dep   | th(s) Groundwater  | Encountered 1.  | 65   | ft. 2  |                    | ft. 3                              |  |
| NW 1 SW 1                        | Est.<br>Bor<br>WE   | Pump test Yield . 15 e Hole Diameter . LL WATER TO BE 1 Domestic | data: Well water gpm: Well water9in. to USED AS: 3 Feedlot 4 Industrial | was  | ft. at ft. at ft. at ft. at ft., at ft | ter                | hours pur hours pur in. ng 11 12 ( | 7-26-93 mping 20 gpn mping 12 gpr to fi Injection well Other (Specify below) mo/day/yr sample was su |
|                                  | S mitte   | ed   |   |  | Wat  | er Well Disinfed   | ted? Yes                           | X No   |
| TYPE OF BLANK                    | CASING USED:  | 5 V  | Vrought iron  | 8 Concre   | ete tile   | CASING J           | OINTS: Glued                       | I.XClamped   |
| 1 Steel                          | 3 RMP (SR)  | 6 A  | sbestos-Cement  | 9 Other  | (specify below   | <i>ı</i> )         | Welde                              | ed   |
| 2 PVC                            | 4 ABS   |  | iberglass   |  |  |                    |                                    | ded  |
| llank casing diamet              | kar   | o <b>45</b>  | . ft., Dia  | in. to   |  | ft., Dia           | . <i></i> i                        | in. to ft.   |
| asing height above               | and surface16   | in., <sub>'</sub>  | weight 160  | ) <u>.</u> <i></i>                               | Ibs./f   | t. Wall thicknes   | s or gauge No                      | 5. SDR 26  |
| YPE OF SCREEN                    | OR PERFORATION MA   | ATERIAL:   |   | 7. PV  | 2  | 10 A               | sbestos-ceme                       | nt   |
| 1 Steel                          | 3 Stainless stee  | el 5 F   | iberglass   | 8 RM   | P (SR)   | 11 0               | ther (specify)                     |  |
| 2 Brass                          | 4 Galvanized s  |  | oncrete tile  | 9 AB   | 5  | 12 N               | one used (op                       | en hole)   |
| CREEN OR PERF                    | ORATION OPENINGS  | ARE:   | 5 Gauze   | d wrapped  |  | 8 Saw cut          |                                    | 11 None (open hole)  |
| 1 Continuous                     | slot 3 Mill slo   | ot •035  | 6 Wire w  | rapped   |  | 9 Drilled hole:    |                                    | (  |
| 2 Louvered sh                    |   | inched   | 7 Torob   | out.   |  | 10 Other (coo      |                                    |  |
| CREEN-PERFORA                    | -   | From 45  | # 10  | 65   | # Eros   | no Other (spec     | 4 4.                               | o  |
|                                  | ,   | From   | ft. to  |  | ft., Fror  | n                  | ft. to                             | o  |
| GRAVEL F                         |   | From <b></b><br>From   | ft. to ft. to   | פס   | t., Fror.<br>ft., Fror   |                    |                                    | o  |
| GROUT MATERI                     |   |  |   | _3 Bento   |  |                    |                                    |  |
| Grout Intervals: F               | rom 15 ft to  |  | ft From   | ft   | -  | ft From            |                                    | . ft. to   |
|                                  | source of possible cont   |  | , 110111  |  | 10 Livest  |                    |                                    | pandoned water well  |
|                                  |   |  | 7 Pit priva   |  |  | •                  |                                    |  |
| 1 Septic tank 4 Lateral lines    |   |  | 7 Pit privy   |  | 11 Fuel storage  |                    | 15 Oil well/Gas well               |  |
| 2 Sewer lines 5 Cess pool        |   |  | 8 Sewage lagoon   |  | 12 Fertilizer storage  |                    | 16 Other (specify below)           |  |
|                                  | ewer lines 6 Seepage  | pit  | 9 Feedyard  |  |  | icide storage      |                                    | •  |
| pirection from well?             | wes <b>t</b>  | TUO 0010 1 00  |   | FROM   | How mar  |                    | DI LICCINO IN                      | ITEDIAL O  |
| FROM 1 TO 3                      | TOP SOIL  | ITHOLOGIC LOG  |   | FROM   | то   |                    | PLUGGING IN                        | VIENVALO   |
|                                  | CLAY TAN SI   | T.MY   | A-44  |  |  |                    |                                    |  |
|                                  | CLAY GRAY H   |  |   |  |  |                    |                                    |  |
|                                  |   | WUT  |   |  |  |                    |                                    |  |
| 65                               | CREVASSE  |  |   |  |  |                    |                                    |  |
|                                  |   |  |   |  |  |                    |                                    | 7711   |
|                                  |   |  |   |  |  |                    |                                    |  |
|                                  | (ATT WATED  | COMING FROM  | (SEPAVEGE)  | <del> </del>                                     |  |                    |                                    |  |
|                                  |   |  |   | <del>                                     </del> |  |                    |                                    |  |
|                                  | UPEN BUI  | TOM ON WELL  |   |  |  |                    |                                    |  |
|                                  |   |  |   | -  |  |                    |                                    |  |
|                                  | <del> </del>  |  |   |  |  |                    |                                    |  |
|                                  |   |  |   |  |  |                    |                                    |  |
|                                  |   |  |   |  |  |                    |                                    |  |
|                                  |   |  |   |  |  |                    |                                    |  |
|                                  |   |  |   |  |  |                    |                                    |  |
| CONTRACTOR'S                     | OR LANDOWNER'S  | CERTIFICATION:   | This water well wa  | s (1) construc                                   | ted_(2) reco   | nstructed, or (3)  | plugged und                        | er my jurisdiction and was   |
|                                  | ay/year)  |  |   |  |  |                    |                                    | edge and belief. Kansas  |
|                                  | or's License No   | 388  | This Water We   |  |  |                    | 1 7/27-                            | 83.1   |
|                                  | name of PESTINGER   |  |   |  | by (signat   |                    | 11/1                               | o turo   |
|                                  | typewriter or ball point pen.   |  |   |  |  | 7                  | Sanding                            | Vanna Daniel   |
| of Health and Enviro             | typewriter or ball point pen. <u>F</u><br>nment, Bureau of Water, Topel | ka, Kansas 66620-0001  | Telephone: 913-296-55   | 45. Send one to                                  | WATER WELL OV  | NER and retain one | for your records.                  | Copies Contains Department   |