ATTITUDE OF BLANK CASING USED: TYPE OF SCREEN OR PERFORATION MATERIAL: Takes A st. Address, Box # 1619 Overlook Dr. Board of Agriculture, Division of Water Resources Application Number: 2 (0.0 7 0.5 7 / 4				WATE	R WELL RECORD For	n WWC-5	KSA 82a-	1212 ID No		
WATER WELL OWNER Prainfe Sky HCOMJW INC.						1		1		
MATER WELL OWNER: Prainte Sky HCOMJW INC. Board of Agriculture. Division of Water Resources Rigs. Sale. Zero General Sale. Service Sale. Service Sale. Service							9	<u>т</u> 16 s	R 38 EW	
RRB, State, ZP COS Salina, Ks 67403 AN X'IN SECTON WITH AN X'IN SECTON BOX. Depth of COMPLETED WELL AN X'IN SECTON BOX. Pump lest data: Well water was fi. sher hours pumping gpm Eat. Yield gpm: Well-WELT STOAT DE USED AS. Eat. Yield gpm: Well-WELT STOAT DE USED AS. S brown by the Complete Stoat Section S	Distance and direction from nearest town or city street address of well if located within city?									
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Salina X SAL					W INC.					
Salina, Ks 67403 Application Number: 2 00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0										
DEPTH OF COMPLETED WELL 240 ft. ELEVATION: 1.3 1.	City, State, 2	ZIP Code	: Salina	, Ks 67403						
DEPTHOR COMPLETE LEVEL TO A 440 ft. ELEVATION B. No purposed a ft. after a ft. a ft	LOCATE	WELL'S LOC	ATON WITH							
WELL'STATIC WATER LEVEL 1, 0,	AN "X" IN	N SECTION B	OX:	DEPTHOLO						
WELL'STATIC WATER LEVEL 1, 0,		N		Depth(s) Groundy	vater Encountered 1			ft. 2	ft. 3 ft.	
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Dasing height above land surface 18 in, weight 2.38 ibs./ft. Wall thickness or gauge No. 7 PYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) 2 Brass 4 Galvanized steel 6 Concrete tille 9 ABS 12 None used (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Clouwerd shutter 4 Key punched 7 Torch cut 10 Other (specify) 2 Clouwerd shutter 4 Key punched 7 Torch cut 10 Other (specify) 5 CREEN-PERFORATION DRINKS SARE: 5 Gauzed wrapped 9 Drilled holes 2 Clouwerd shutter 4 Key punched 7 Torch cut 10 Other (specify) 5 CREEN-PERFORATED INTERVALS: From 200 ft. to 240 ft. From ft. to ft. From ft. Torchilles ft. From	Blank casing	g diameter	4.5	in. to 200	ft., Dia	in. to)	ft., Dia	in. toft.	
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/yr) 3 6 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 This Water Well Record was completed on (mo/day/yr) 1 4 08 Under the business name of Woofter Pump & Well Inc. INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment. Bureau of Water, 1900 S.W.							1			
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Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.	INSTR	UCTIONS: Ple	ase fill in blank	s and circle the corre	ct answers. Send three co	pies to Kansa	as Departme	ent of Health and Environmen	nt, Bureau of Water, 1900 SW	
	Jackso	n St., Ste. 420,	Topeka, Kansa	as 66612-1367. Tele	phone: 913-296-5545. Se	nd one to WA	TER WELL	OWNER and retain one for	your records. MOSTA FOA	