WATER	R WELL RECORD	Form WWC-5 K	SA 82a-1212 ID No	)			
A	Fraction	_	Section Number	Township Number	- 1	ange Num	per
County: Mc Ph scson	SW 14 SE	1/4 NE 1/4	17	T 17	S R	_3_	<b>EØ</b>
Distance and direction from nearest town o					_	44	7
2 WATER WELL OWNER: MID KANSUS COOP ASSOCIATION							
RR#, St. Address, Box # : Mound City, State, ZIP Code : 307	My KE	67107		Board of Agricult Application Num		f Water Re	sources
3 LOCATE WELL'S LOCATION WITH 4	EPTH OF COMPLE	TED WELL	•	TION:			
AN "X" IN SECTION BOX:	epth(s) Groundwater   ELL'S STATIC WATE   Pump test of t. Yield	Encountered 1 R LEVEL	ft. below land surfaceft. aft. a c water supply eld water supply estic (lawn & garden)	e measured on mo/day/ ffter	/yrours pumping ours pumping 11 Injection v 12 Other (Sp	vell ecify below	gpm gpm v)
5 TYPE OF BLANK CASING USED:			Concrete tile	CASING JOINTS:		•	
1 Steel 3 RMP (SR)  PVC 4 ABS	6 Asb		Other (specify below)		Welded Threaded		
Blank casing diameter2	_	•					
Casing height above land surface							
TYPE OF SCREEN OR PERFORATION M			PVC	10 Asbestos			
1 Steel 3 Stainless Ste 2 Brass 4 Galvanized 9		rgiass crete tile	8 RMP (SR) 9 ABS	· · ·	pecify)ed (open hole)		
SCREEN OR PERFORATION OPENINGS	ARE:	5 Guazed w	rapped	8 Saw cut	, ,	ne (open ho	ole)
	lot 0,/0	6 Wire wrap	• •	9 Drilled holes			•
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)ft.							
SCREEN-PERFORATED INTERVALS:	From2.5	ft. to	ft., From		ft. to		ft.
GRAVEL PACK INTERVALS:	From2-5	ft. to	π., From		π. το ft. to	•••••	ft.
	From	ft. to	ft., From		ft. to		ft.
6 GROUT MATERIAL: 1 Neat cement							
Grout Intervals: From							
What is the nearest source of possible con		,	10 Livesto		14 Abandone		
1 Septic tank 4 Lateral lines		7 Pit privy	Fuel st	torage	15 Oil well/Gas well		
2 Sewer lines 5 Cess poo		8 Sewage lagoo		er storage	16 Other (specify below)		
3 Watertight sewer lines 6 Seepage pit		9 Feedyard	•		-		
Direction from well? Eqsf	ITUO COIC LOC			y feet? 35			
	ITHOLOGIC LOG		ROM TO	PLUGGII	NG INTERVAL	.S	
5 S Fill Rock		Coal BIK					
15 25 Bur Silly	y Clay to S	: 14					
13 22 27 37 179		w 1/2 231					
							·
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was completed on (mo/day/year)							
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 objects to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.							