				ER WELL RECORD	O Form W	WC-5 KSA			
<b>∟</b>		VATER WELL:	Fraction		~~~	Section Num			Range Number
County:		1 1	NE 1/4		SW 1/4	20	T 18	S	R 20 B(W)
		ion from nearest to hippet Ave, Ale		address of well if le	ocated withir	i city?			O
2 WAT	ER WELL (	OWNER: Mid-Sta		ор					
	Address, B		195 enter, KS 6757	75			_		sion of Water Resources
3 LOCATE WELL'S LOCATION 14 DEPTH OF COMPLETED WELL 44.5 # ELEVATION									
WITH	WITH AN "X" IN SECTION BOX:  N  Depth(s) Groundwater Encountered 1								
1 Mile			Bore Hole Diam WELL WATER 1 Domestic	eter 8 in TO BE USED AS: 3 Feedlot	to 5 Public v 6 Oil field	44.5	t., and	g 11 (12)	to ft. Injection well Other (Specify below)
<u> </u>	X		2 Irrigation Was a chemica submitted			ted to Departm	v 10 Monitoring we nent? YesNo <b>√</b> Water Well Disinfecu	; If yes	Air sparge , mo/day/yr samble was No 🗸
5 TYPE	OF BLANK	CASING USED:		5 Wrought iron		oncrete tile		NTS: Glue	d Clamped
1 S		3 RMP (SR	)	6 Asbestos-Ceme		ther (specify b	,		led
<b>(2)</b> P		4 ABS		7 Fiberglass					aded. 🗸
									. in. to ft.
				in., weight					lo Sch. 40
		OR PERFORATION				PVC		estos-cem	1
1 S		3 Stainless		5 Fiberglass		RMP (SR)			)
	rass	4 Galvanize		6 Concrete tile		ABS		e used (op	•
SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed w 1 Continuous slot 3 Mill slot 6 Wire wrap							8 Saw cut		11 None (open hole)
	onunuous: ouvered sh	\ /	y punched		ire wrapped		9 Drilled holes	A	
		TED INTERVALS:			rch cut	E 11			to ft.
	A-100-100	ACK INTERVALS:	From From	. <b>3</b> .7 ft. to	)	. <b>5</b> ft., ft.,	From	ft. ft.	to
Grout Inte			ft. to 34.	Z Cernent grout	34		7ft, From		
	tic tank	4 Latera		7 Pit privy			uel storage		il well/Gas well
2 Sewer lines 5 Cess pool							12 Fertilizer storage 16 Other (specify below)		
3 Watertight sewer lines 6 Seepage pit				9 Feedyard			13 Insecticide storage 16 Other (specify below)		
	from well?			o . coayan			nany feet?		
FROM	ТО		LITHOLOGIC	LOG	FRO		•	UGGING IN	NTERVALS
0	15	Clay, silty, Bro							
15	20	Silt, Lt. Brown							
20	28	Clay, silty, Bro		Brown					
25	44.5	Sand, f-m, Dar							
28	31	Sand, clayey, f	-m, Gray						
31	35	Sand, f-m, Gra	y to Dark Gr	ay					
				transference describer					
				WATER AND ADDRESS OF THE ADDRESS OF					
							AS6, Flushmount		
7 CONTR	RACTOR'S	OR LANDOWNER'S	S CERTIFICATION	ON: This water wel	was (1) cor	nstructed, (2)	econstructed, or (3)	olugged un	der my jurisdiction
		n (mo/day/year)							knowledge and belief.
					This Water \		as completed on (mø		6/20/2011
	business n			oCore, Inc.			nature)	io W	20
INSTRU	UCTIONS: Us	e typewriter or ball point	t pen. <i>PLEASE PR</i>	ESS FIRMLY and PRIN	<u>//</u> clearly. Plea	se fill in blanks, u	nderline or circle the correct	t answers. S	end top three copies to Kansas
Departi	ment of Health	and Environment, Bure	au of Water, Topeka	a, Kansas 66620-0001.	Telephone: 913	-296-5545. Send	one to WATER WELL OW	NER and reta	in one for your records.