	WATE	ER WELL RECO	RD Form WW	C-5 KSA 82a	-1212 ID No	0	
1 LOCATION OF WA	TER WELL:	Fraction		Se	ction Number	Township Numbe	r Range Number
County: NESS		NE 14	NE ¼ SI	W 1/4	29	т 18	s R 23 🕱 W
Distance and direction	from nearest town 6 E CEDAR	or city street ad		ated within city?			
2 WATER WELL OW		OUG WITT			 		
RR#, St. Address, Box	77	06 E CED				Board of Agricult	ure, Division of Water Resources
City, State, ZIP Code	: I	NESS CIT	Y KS 6756	0		Application Numl	
AN "X" IN SECTION	BOX: [VELL'S STATIC	WATER LEVEL	ft. be <u></u> ft. be	low land surfac	e measured on mo/day/	. ft. 3 ft. yr10-28-03
NW	-NE V	Pump test data: Well water was					
w		2 Irrigation	4 Industrial	录換 mestic (la	wn & garden)	10 Monitoring well	
SW	- SE V	Vas a chemical/ nitted	bacteriological san	mple submitted to		esNoXX; If yater Well Disinfected? Ye	ves, mo/day/yrs sample was sub- es No 🗴 🗴
5 TYPE OF BLANK (CASING USED: 3 RMP (SR)		5 Wrought iron 6 Asbestos-Ceme	8 Conc	ete tile (specify below		Glued .XX Clamped
T Steel XXVC	4 ABS		7 Fiberglass			<i>,</i> 	Threaded
							ft.
Casing height above la	and surface	1.8	in., weight	160		lbs./ft. Wall thickness or	guage No
TYPE OF SCREEN OF			-	xx°		10 Asbestos	
1 Steel 2 Brass				5 Fiberglass 8 RMP (SR) 6 Concrete tile 9 ABS			pecify)ed (open hole)
SCREEN OR PERFOR	RATION OPENING	S ARE:	5 (Guazed wrapped		8 Saw cut	11 None (open hole)
1 Continuous slot 2 Louvered shutte	3 XVX		6 '	Wire wrapped Torch cut		9 Drilled holes 10 Other (specify)	ft.
SCREEN-PERFORAT	-		28 # #	. 48	ft From		. ft. toft.
SCREEN-PERFORAL	ED INTERVALS:	From		o	ft., From		. ft. toft.
GRAVEL PA	CK INTERVALS:	From	2.8	o4.8	ft., From		. ft. toft.
		From	ft. to	o	ft., From		. ft. toft.
6 GROUT MATERIA	AL: 1 Neat o		2 Cement grout	t _x 3 _x Bei			
Grout Intervals: Froi	n0	ft. to	28 ft., From	ft.	to	ft., From	ft. toft.
What is the nearest so	urce of possible co	ontamination:			10 Livest	tock pens	14 Abandoned water well
 Septic tank 	1 Septic tank 4 Lateral lines		7 Pit privy		11 Fuels	storage	15 Oil well/Gas well
2 Sewer lines	5 Cess p	ool	8 Sewage lagoon		12 Fertilizer storage		16 Other (specify below)
3 Watertight sewer	er lines 6 Seepa	ge pit	9 Feedyard		13 Insecticide storage		
Direction from well?					How mar	<u> </u>	
FROM TO		LITHOLOGIC	LOG	FROM	ТО	PLUGGII	NG INTERVALS
0 10	SURFAC						
10 30		RAY CLAY					
30 40	1		D ¢ YELLO	W CLAY			
40 45	1	FINE SA	ND				****
45 48	BLUE S	HALE					
					ļ		
			·				
7 contractor's (OR LANDOWNER	'S CERTIFICAT	ION: This water w	vell was (%)X const	ructed, (2) reco	onstructed, or (3) plugge	ed under my jurisdiction and was
completed on (mo/day/	year)1.02	.80.3			and this re	cord is true to the best of	my knowledge and belief. Kansas
Water Well Contractor's under the business nar			This V N DRILLIN			ed on (mo/day/)r)1 (signature)	villisan
INSTRUCTIONS: Use typ	ewriter or ball point pen.	PLEASE PRESS FIR	MLY and PRINT clearly.	. Please fill in blanks, u	nderline or circle the elephone 785-296-5	correct answers. Send top hire	e copies to Kansas Department of Health L OWNER and retain one for your
records. Fee of \$5.00 for		,					