WA	TER WELL RECO	RD Form WWC-5	KSA 82a-	1212 ID No	0	···-
1 LOCATION OF WATER WELL:	Fraction			tion Number	Township Number	Range Number
County: NEBS	SE ¼	SE ¼ NE	··	31	T 18 s	R 23 KW
Distance and direction from nearest to 502 S	wn or city street add TOPEKA	ress of well if located NESS CITY	within city?			
2 WATER WELL OWNER:	FRED HILM					<u>-</u>
RR#, St. Address, Box # : City, State, ZIP Code :	PO BOX I				Application Number	Division of Water Resources
3 LOCATE WELL'S LOCATION WITH	4 DEPTH OF CO	MPLETED WELL	50	ft. ELEVA	TION:	
AN "X" IN SECTION BOX:	Depth(s) Groundw WELL'S STATIC V	VATER LEVEL4	.Qft. belo	ow land surface	e measured on mo/day/yr	3ft.
NWNE	Est. Yield4. .5.	gpm: Well water	was	ft. a	after hours	pumpinggpm
	WELL WATER TO 1 Domestic		Public water : Dil field water	• • •		Injection well Other (Specify below)
W 1 1 E 2 Irrigation 4 Industrial XXDomestic (lawn & garden) 10 Monitoring well						
SW SE Was a chemical/bacteriological sample submitted to Department? Yes Noxx; If yes, mo/day/yrs sample						
	mitted			Wa	ater Well Disinfected? Yes	No xx
5 TYPE OF BLANK CASING USED:		Wrought iron	8 Concre			uedXX. Clamped
1 Steel 3 RMP (S 2 X X C 4 ABS		Asbestos-Cement Fiberglass		(specify below)		readed
Blank casing diameter5						
Casing height above land surface TYPE OF SCREEN OR PERFORATION		in., weightI.			lbs./ft. Wall thickness or gu 10 Asbestos-Co	
1 Steel 3 Stainles		Fiberglass	<u>ኢ</u> ዮጵላ 8 RM	% 1/P(SR)		ify)
2 Brass 4 Galvani:		Concrete tile	9 AB		12 None used	
SCREEN OR PERFORATION OPENII		5 Guazed wrapped 6 Wire wrapped		8 Saw cut 11 None (open hole) 9 Drilled holes		
1 Continuous slot XXMill slot 6 Wire Wrapped 9 Diffied floies 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)ft.						
SCREEN-PERFORATED INTERVALS: From						
GRAVEL PACK INTERVALS						toft.
GRAVEL PACK INTERVALS: From						
6 GROUT MATERIAL: 1 Nea	it cement	2 Cement grout		tenite /	1 Other	
						ft. toft.
What is the nearest source of possible		·		10 Livest		Abandoned water well
1 Septic tank 4 Lateral lines		7 Pit privy		11 Fuels	•	Oil well/Gas well
2 Sewer lines 5 Cess pool		8 Sewage lagoon			_	Other (specify below)
3 Watertight sewer lines 6 Seepage pit		9 Feedyard		13 Insecticide storage		
Direction from well? FROM TO	LITHOLOGIC L	OG	FROM	How man	y teet? PLUGGING	INTERVALS
	ce_clay		1110		T ED GGITTG	
	YELLOW CLA	Y				
35 40 FINE S	SAND					
	& CLAY					
45 50 BLUE S	SHALE					
		-				
						
			 			
-1			<u></u>			
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (XX) onstructed, (2) reconstructed, or (3) plugged under my jurisdiction and was						
completed on (mo/day/year)1.00.70.3						
		N DRILLING	cii i 100010		signature)	and assen.
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send on the copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-298-5522. Send one to WATER WELL OWNER and ratain one for your						
records. Fee of \$5.00 for each constructed well.						