	ION OF WA			$\overline{Q}$	Form WWC-5	1	tion Number	Township Number	Range Num	_
	ne pha		t town or city street	address o			30	T / B S	R	EW
58	V 3		MeDhe			within ony.				
WATER	R WELL OW			Blan	d					
RR#, St. Ac City, State,	ddress, Box ZIP Code	# : /A.	ophers	on.	Ks. 6	7460		Board of Agriculture, Application Number:		
	WELL'S LO		TH 4 DEPTH OF	COMPLET	ED WELL	140	O. ft. ELEVA	TION:		
AN "X" II	N SECTION	BOX:	Depth(s) Grou	undwater E FIC WATER	ncountered LEVEL	1ft. beld	ftft.	TION:ft. 2 ft. 2 e measured on mo/day/yr	1-30-09	7 ft.
		, ]	P <sub>a</sub>	ump test da	ata: Well wate	r was	ft. a	after hours	oumping	gpm
	-NW	- NE	WELL WATER			was Public water s		after hours   8 Air conditioning 11	oumping njection well	gpm
w	ı	' <b>x</b>	1 Domest 2 Irrigation			Dil field water		9 Dewatering 12 (	Other (Specify below	
VV	1		2 migation	4 111	uusiiiai 7 j	Joinestic (lav	vii & gaideii)	To Workoning well	••••••	
	-sw	- SE	Was a chemic	cal/bacterio	logical sample :	submitted to I	Department? Y	res; If yes,	mo/day/yrs sample v	was sub-
			mitted		,			ater Well Disinfected? Yes	No	
	S									
TYPE (	OF BLANK (	CASING US 3 RMF		5 Wrou 6 Asbe	ght iron stos-Cement	8 Concre 9 Other	ete tile (specify below)	CASING JOINTS: Glue ) Wel	ed	
2 PVC		4 ABS	` , '	7 Fiber	glass			Thre	eaded	
	ng diameter		in. toأ	/2	D ft., Dia	000	in. to	ft., Dialbs./ft. Wall thickness or gua	in to	ft.
-	ght above la SCREEN OF		ATION MATERIAL:	in., v	veight	7. PV		10 Asbestos-Cer		
1 Stee		3 Stair	nless Steel	5 Fiber	•	8 RM	IP (SR)	11 Other (Specify	y)	
2 Bras			anized Steel	6 Conc		9 AB	S	12 None used (o		
	JR PERFOR		ENINGS ARE: 3 Mill slot			ed wrapped wrapped		8 Saw cut 9 Drilled holes	11 None (open h	ole)
	vered shutte		4 Key punched	- 1 /4 - 4	7 Torch			10 Other (specify)		ft.
SCREEN-I	PERFORATI	ED INTERV						ft. to		
(	GRAVEL PA	CK INTERV					,	ft. to		
			From		ft. to		ft., From	ft. to	o	ft.
GROL	IT MATERIA	L: 1	Neat cement	2 Ce	ment grout	3 Bent	onite 4	1 Other		
Grout Inter					., From	ft. t		ft., From	ft. to	ft.
		•	sible contamination:		7 Pit privy		10 Livest 11 Fuels	'	Abandoned water w Oil well/Gas well	ell
1 Septic tank 4 Lateral lines 2 Sewer lines 5 Cess pool					8 Sewage	agoon		-	Off well/das well Other (specify below	v)
3 Watertight sewer lines 6 Seepage pit					9 Feedyard	-	13 Insect	cicide storage		
Direction from well?					100			How many feet? 100 4  TO PLUGGING INTERVALS		
FROM	70	Val	IDW & K		010	FROM	ТО	PLUGGING II	NIERVALS	
	100	101	1000 - 11	2 a	Cray				· · · · · · · · · · · · · · · · · · ·	
108	137	mo	divns	and	1 - 100	eter				
130	1/1/2	<i>a</i> = -	101-					DECENTED		
137 140 Red Clay							RECEIVED			
								AUG 2 5 2004		
						-		BUREAU OF WATER		
7						L		*		
☐ CONTR completed :	ACTOR'S C on (mo/day/v	rear)	VNER'S CERTIFIC	ATION: Th	is water well wa	as (1) constru	and this	onstructed, or (3) plugged un	der my jurisdiction	and was
Vater Well	Contractor's	Licence No	180	/	This Water	Well Record	was completed	enstructed, or (3) plugged un cord is true to the best of my k d on (mo/day/yr)	-14	/-)
under the b	usiness nam	ne of	OKhU	0 5	ファンバ	n N		signature)	Sanda	u

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill witblanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> well.