.1				WELL RECOR	D Form W		KSA 82a-						
1 LOCATION O		_	Fraction	A .	0 -	. <i>a</i> n	Number		ship Nun	nber	Ran	ge Numi	ber
County: Ma			3W 1/4	J W 1/4	J. E 1/4		7	Τ	<u> </u>	S	R	<u> </u>	E/000
Distance and di	inection from no					city?							
I n	Galva	<u>.</u>	428 .	Mulbe	7^^V								
2 WATER WE		1	OST	- 1									
RR#, St. Addre			nulben	~ V				D				14/-4 5	,
				, , ,					•	riculture, D	IVISION OF	water F	resources
City, State, ZIP			a, K1.	0 /	743			App	dication I	Number:			
J LOCATE WE AN "X" IN SI	ELL'S LOCATION BOX:			OMPLETED WEI			t. ELEVAT						
-	- 7 -			WATER LEVEL	/ /							• -	<u> </u>
† 1 i	i	"											
N	W N	E 		test data: Wel									
1 1 1		E	st. Yield 🚣 🤔	Ş gpm Wel	l water was 🚄	٠٠	ft. af	ter		hours pur	mping		gpm
<u>•</u>	<u> </u>	Bo	ore Hole Diame	ter 7 i	n. to 🚅		ft., a	nd		in.	to		ft.
* w - 1	1 1	─ l lw	ELL WATER TO	O BE USED AS	5 Public	water su	ylqqı	B Air cond	itioning	11	njection v	/ell	
- l '	' i	1 1	1 Domestic	3 Feedlot	6 Oil fie	ld water s		9 Dewater	-		Other (Spe		ow)
s\	W SE		2 Irrigation	4 Industria	-		en only, 1		•		· · · · · · · · · · · · · · · ·	•	· '
1 !	! . !		•										
<u> </u>	<u>' </u>			acteriological sa	mpie submitte	i to Depar							was sub-
-	<u> </u>		itted				Wat	er Well Dis	sinfected	? Yes	-X- N	10	
5 TYPE OF BL	LANK CASING	USED:		5 Wrought iron	8 (Concrete t	ile	CASI	ng Join	TS: Glued	I. ,7 0	Clamped	
1 Steel	3	RMP (SR)		6 Asbestos-Cer	ment 9 (Other (spe	cify below)		Welde	ed		
2_PVC	4	ABS	4.	7 Fiberglass						Threa	ded		
Blank casing dia	ameter •	_{in}	_{to} 23	•									
		,	<u> </u>	in., weight C.	1001	120		II., Dia			""かつ	14	
Casing height a		•		in., weight	٠٠٠٠ . ٢٠٠٠		IDS./T					/. <i>/</i>	
TYPE OF SCRI	EEN OR PERI	-ORATION I	MATERIAL:			7 PVC			10 Asbe	stos-ceme	nt		
1 Steel	3	Stainless s	teel	5 Fiberglass		8 RMP (SR)		11 Other	(specify)			
2 Brass	4	Galvanized	steel	6 Concrete tile		9 ABS			12 None	used (ope	en hole)		
SCREEN OR P	PERFORATION	OPENINGS	S ARE:	5	Gauzed wrap	oed		8_Saw c	ut		11 None	(open h	nole)
1 Continu	ious slot	3 Mill s	slot	6 Wire wrapped				9 Drilled				(
2 Louvere			punched										
			-)	3	Torch cut	ラ		10 Other					I
SCREEN-PERF	-OHATED INT	EHVALS:	From	•	بم. کب to		ft., Fron						- 1
			From	ft.	to		ft., Fron	n		ft. to	o.,		ft.
GRAV	/EL PACK INT	ERVALS:	From	<i>J. Q</i> ft.	<u>د. د to</u>		ft., Fron	n		ft. to)		ft.
			From	ft.	to		ft., Fron	n		ft. to	0		ft.
6 GROUT MA	TERIAL:	1 Neat cer	ment	2 Cement grout	3	Bentonite	4 (Other					
Grout Intervals:		Ø ft.		ft., From .									
What is the near						. 11. 10.			10111				
							10 Livest	•			bandoned		/eii
1 Septic tank 4 Lateral lines			7 Pit privy			11 Fuel storage				15 Oil well/Gas well			
2 Sewer I	lines	5 Cess po	ool	8 Sewage lagoon			12 Fertilizer storage 16 Other (specify below)						v)
3 Watertight sewer lines 6 Seepage pi			e pit	9 Feedyard			13 Insecticide storage						
Direction from	well?	E					How man	y feet?	30				
FROM	το		LITHOLOGIC	LOG	FR	OM	то		L	ITHOLOG	IC LOG		
0 1	15 (lax										-	
		,,,,,							*				
11- 3	7 1	<u> </u>	L. m	21:4	- O								
15 3	3 +	ing c	00 1116	2divn	7 2 ac 1	Q							
	1												
	•												
	•												
	-												
	-												
7 CONTRACT	TOR'S OR LAI	NDOWNER'S	S CERTIFICATI	ON: This water	well was (1) c	onstructed	1. (2) reco	nstructed.	or (3) pl	uaaed unc	ler my iur	isdiction	and was
			CERTIFICATI	ON: This water									
completed on ((mo/day/year) .		CERTIFICATION	٢		an	d this reco	rd is true to	the bes		owledge	nd belie	
completed on (i Water Well Cor	(mo/day/year) . ntractor's Licer	ise No	120	This W	ater Well Reco	and	d this reco	rd is true to on (ma/da)	the bes			nd belie	
completed on (Water Well Cor under the busin	mo/day/year) ntractor's Licer ness name of	ise No Bac	120	This W	ater Well Reco	and	d this recompleted of by (signat	rd is true to on (marday cure)	the bes	t of my kn	owledge	and belie	f. Kansas
completed on (i Water Well Cor under the busin INSTRUCTION	(mo/day/year) . ntractor's Licer ness name of NS: Use typewri	nse No. Bac iter or ball po	Kh v g int pen, PLEAS	This W	ater Well Reco	ord was c	d this recompleted of by (signate Please fill in	on (moday ure)	o the bes	t of my know	owledge a	and belie	f. Kansas
completed on (Water Well Cor under the busin INSTRUCTION	mo/day/year) . ntractor's Licer ness name of NS: Use typewri Kansas Depart	nse No. Bac iter or ball po	Kh v g int pen, PLEAS	This W	ater Well Reco	ord was c	d this recompleted of by (signate Please fill in	on (moday ure)	o the bes	t of my know	owledge a	and belie	f. Kansas