WATER WELL OWNER L. De H. DE H					R WELL RECORD	Form WWC-5				
WATER WELL OWNER L. De Hoft gains Barrier de directe of well if located within oity? - 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	→	ON OF WAT		1		1	_	1 '	1	•
WATER WELL OWNER: LEG ET ID G_LTLB Bayes of Agoinsture, Division of Water Resources Application Number[765 - 41]	County: Distance a	and direction					16	<u>Гт</u> 20	S	R 10 E(W)
WATER WELL OWNER: LEG ET ID G_LTLB Bayes of Agoinsture, Division of Water Resources Application Number[765 - 41]			2 N 1	_w 0	F Raymond	Ks.				
Day, State, ZP Dodg S	2 WATER	R WELL OW	NER: Tee u	odéina	wymoria,	•		-		
CONTRACTORS OR LANDOWNERS CERTIFICATION: This water well was 30 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was grouped to fine from the to to the best of my completed on (microsity) and some standards and some standards. Some from the contraction of	RR#, St. A	Address, Box	* # · ጸሰፍ እነ	ĭ 1∩th					iculture, Di	vision of Water Resources
AN Y IN SECTION BOX Comparison Comparis	City, State	, ZIP Code	Blue s	nnings	Ma 64015			Application N	lumber:T8	8-41
WELLS STATIC WATER LEVEL. 1.5. 1. below land surface measured on moidayby. Pumping gom gom gom gom gom gom gom gom gom go	LOCATE AN "X"	IN SECTIO	OCATION WITH	DEPTH OF C	OMPLETED WELL.	8:7	ft. ELEVA	TION:		
Pump test data: Well water was to the first per second of the per	- r		· — —			_				
Best Hole Diameter 9 in 1 to 1.5 th. 1	1	i	i []							
Bore Nelo Diameter 9, in. to ft., and in. to ft. well. LMTER TO BE USED As 5 Public water supply 8 Air conditioning 11 Injection well 11 Injection will 11 Injection will 12 Orber (Specify below) 2 Immitted water and parted northy 10 Observation well 12 Orber (Specify below) 11 Orber (Specify below) 12 Immitted water included in the part of	-	WW	NE							
Well Water TO BE USED AS: 5 Public water supply 9 Pavestering 11 Injection well 1 Domestic 3 Feeded to \$6 Oil field water supply 9 Pewatering 12 Other (specify below) 10 Observation well was a chemical-bacteriological sample submitted to Department? Yes. No.X if yes, modalyly sample was submitted water Well Districtioned? Yes No.X by Mark Well Districtioned? Yes No.X is supple was submitted to Department? Yes. No.X if yes, modalyly sample was submitted water Well Districtioned? Yes No.X is supple was submitted on the control of th	!	! .(\ ' I I							-
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TYPE OF BLAK CASING USED: 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) 1 Steel 3 RMP (SR) 7 Ribrigliass Threaded	1 1	į X	! /	•						
TYPE OF BLANK CASING USED: 5 Monught iron 8 Concrete life CASING JOINTS: Glued X. Clamped 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded 7 Piberglass 1 Threaded 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	<u> </u>				bacteriological sampl	e submitted to Di			-	
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#PVC 4 ABS 7 Fiberglass Threeded Blank dasing diameter 5 in to .77 ft, Dia in to .ft, Dia in	-				_					•
Blank Saving diameter 5 in. to 7.7 if., Dia in. to ft., Dia in. to ft. Casing height above land surface 24 in., weight weight bus./ft. Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: X7 PVC 10 Asbestos-coment 1 Steel 3 Stainfess steel 5 Fibergiass 8 RMP (SR) 11 Other (specify)				1)						
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2 Brass								10 Asbes	tos-cemen	t
1	1 Ste	eel	3 Stainless	steel	5 Fiberglass	8 RM	IP (SR)	11 Other	(specify) .	
1 Continuous slot					6 Concrete tile	9 AB	S	12 None	used (oper	n hole)
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 77 ft. to 87 ft., From ft. to ft. From ft. to 87 ft., From ft. to ft. GRAVEL PACK INTERVALS: From 20 ft. to 87 ft., From ft. to ft. From ft. to ft. From ft. to ft. GROUT MATERIAL: X1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Intervals: From 0 ft. to ft. GROUT MATERIAL: X1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Intervals: From 0 ft. to ft. Material intervals: From 1 ft. to ft. 10 Livestock pens 14 Abandoned water well 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 3 Waterlight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 10 Direction from well? FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 10 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (moldaylyear) 1 - 25 - 88 and storage 10 miles record is true to the best of my knowledge and belief. Kansas water Well Contractor's License No. 462 This Water Well Record was completed on (moldaylyyear) 3 - 14 - 88. INSTRUCTIONS: Use sypewriter or ball point fan. PLANS FRESS HIMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answells. Send top time copies to Kansas November Health and Environment. Bureau of Water Protection. Topeka, Kansas 66620-720, Telepone 91 9862-9804 note to the Use LO Wicken and retain one for your	SCREEN (OR PERFOR	RATION OPENING	SS ARE:	5 Gai	uzed wrapped		8 Saw cut		11 None (open hole)
SCREEN-PERFORATED INTERVALS: From	1 Co	ntinuous slo	t 25 Mil	l slot	6 Wir	e wrapped		9 Drilled holes		
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GRAVEL PACK INTERVALS: From 20 ft. to 87 ft., From ft. to ft. from ft. from ft. ft. from	SCREEN-F	PERFORATI	ED INTERVALS:							
From ft. to ft., From ft., To ft	G	BRAVEL PA	CK INTERVALS:							
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What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 1 Sewer lines 5 Cess pool 8 Sewage lagoon 1 Sertilizer storage 1 So liwell/Gas well 1 Fuel storage 1 So Predyard 1 So Direction from well? FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 1 - 25 - 88 And this record is true to the best of my knowledge and belief. Kansas water Well Contractor's License No. 462 This Water Well Record was completed on (mo/day/yr) 3 - 14 - 88 by (signature) 10 Livestock pens 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) 12 Fertilizer storage 16 Other (specify below) 12 Fertilizer storage 12 Fertilizer storage 13 Contractor's License No. 462 This Water Well Record was completed on (mo/day/yr) 3 - 14 - 88 INSTRUCTIONS: Use typewriter or bail point ten 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) 12 Fertilizer storage 16 Other (specify below) 12 Fertilizer storage 17 PROM 10 LITHOLOGIC LOG FROM 10 LITHOLOGIC LOG LITHOLOGIC LOG LITHOLOGIC LOG CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 3 Lithologic Log 1 - 25 - 88 And this record is true to the best of my knowledge and belief. Kansas Nater Well Contractor's License No. 462 This Water Well Record was completed on (mo/day/yr) 3 - 14 - 88 by (signature) 1 - 25 - 88 Noster Well Contractor's License No. 462 This Water Well Record was completed on (mo/day/yr) 3 - 14 - 88 Noster Well Contractor's License No. 462 This Water Well Record was completed on (mo/day/yr) 3 - 14 - 88	_				•					
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TO LITHOLOGIC LOG TOP 8011 Clay Sandstone CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 10) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 1 - 25 - 88 and this record is true to the best of my knowledge and belief. Kansas Nater Well Contractor's License No. 462 This Water Well Record was completed on (mo/day/yer) 1 - 25 - 88 Nater Well Contractor's License No. 462 This Water Well Record was completed on (mo/day/yer) 3 - 14 - 88 Noter Well Contractor's License No. 462 INSTRUCTIONS: Use typewriter or ball point pen. PLASE THIMLY and PRINT clearly, Please fill in blanks, underline or circle the correct answells. Send top three copies to Kansas Department of Health and Environment, Bureau of Water Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your		•	os o ocepa	-3- Pr.	5 i couyaid			J		
clay sandstone CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 10 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year)				LITHOLOGIC	LOG	FROM			THOLOGIC	CLOG
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