		ER WELL RECORD	Form WWC-5	KSA 82a	1212	
LOCATION OF WATER WE				tion Number	Township Number	Range Number
ounty: Mctherson	1 SW 1	4 Sw. 1/4 N	W 1/4	9	T 2/ S	R 4/ EM
stance and direction from ne	1.		-		• ,	
	12 mi N	of Inma	n			
WATER WELL OWNER:	Lowell	Ely				
R#, St. Address, Box # :	RX 2, B	0 × 4			Board of Agriculture	e, Division of Water Resourc
ty, State, ZIP Code :	Inman,	KS 67546			Application Number	
LOCATE WELL'S LOCATIO	N WITH 4 DEPTH OF	COMPLETED WELL	1.1.0	ft. ELEVA	ΓΙΟΝ:	
TYPE OF BLANK CASING  Steel  Ank casing diameter  PEOF SCREEN OR PERF  Steel  Sasing height above land surface  PEOF SCREEN OR PERF  Steel  Basing height above land surface  Steel  Ste	Depth(s) Groun WELL'S STATH Pun Est. Yield, Bore Hole Dian WELL WATER ① Domestic 2 Irrigation Was a chemica mitted  USED: RMP (SR) ABSto	dwater Encountered 1 C WATER LEVEL	ft. ber was	elow land surf.  ft. af	ft.	gpumping / Q gp pumping / Q gp pumping gp in. to //Q 1 1 Injection well 2 Other (Specify below)  es, mo/day/yr sample was so
CREEN OR PERFORATION OPENINGS ARE:			5 Gauzed wrapped			None (open hole)
1 Continuous slot	3 Mill slot		wrapped		9 Drilled holes	
2 Louvered shutter CREEN-PERFORATED INTE	4 Key punched	7 Torch			· · · · · · · · · · · · · · · · · · ·	
rout Intervals: From	From  1 Neat cement  3ft. to 22 possible contamination:	ft. to  2 Cement grout  3 ft., From  7 Pit privy	<b>ூB</b> ento ft.	ft., From nite 4 to	n ft Other ft., From ock pens 14 storage 15	to
2 Sewer lines 5 Cess pool		Sewage lage				Other (specify below)
3 Watertight sewer lines 6 Seepage pit		9 Feedyard				
rection from well?	/w			How man	y feet? 200	
ROM TO	LITHOLOGIC	LOG	FROM	ТО	PLUGGING	INTERVALS
0 11 Br	Clay					
11   110   5h	4/2					
					of the control of the	The many was a
	THE THE STATE OF T					
			-			
CONTRACTOR'S OR LANG	DOWNER'S CERTIFICAT	ION: This water well wa	as <b>(1)</b> construc	cted, (2) recor	nstructed, or (3) plugged u	nder my jurisdiction and w
mpleted on (mo/day/year)	12-21-92			and this recor	d is true to the best of my l	knowledge and belief. Kans
ater Well Contractor's Licens						
der the business name of						114
	PHILL DA	11119		J (Signati	the correct answers. Send top thr	

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PHESS FIHMLY</u> and <u>PHINI</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL. OWNER and retain one for your records.