			WAT	ER WELL RECORD	Form WW	C-5 KSA 82	a-1212		MU-7	
LOCATIO	N OF WA	TER WELL:	Fraction			Section Number		Number	Range Number	
County: R			SE 1			9	T 2	<u>s</u>	R g E	
Distance an				address of well if locat	ed within cit	y?				
		13 N. Pione	eer, Alden	, Kansas						
	WELL OW		iora.							
		_x "Thomas My Box 224,		67510				•	Division of Water Resource	
					15	^		tion Number:		
AN "X" I	N SECTIO	N BOX:								
									3 	
†	i								ımping gpr	
	- NW	NE							imping gpr	
	!								imping	
ŧ w ├	 	E		TO BE USED AS:		vater supply	8 Air condition		Injection well	
-	i		1 Domestic				9 Dewatering	ū	Other (Specify below)	
	- SW	SE	2 Irrigation			,,,	_			
	1		_						, mo/day/yr sample was su	
<u>.</u> –			mitted	,		•	ater Well Disinfe	•	No X	
TYPE OF	F BLANK (CASING USED:		5 Wrought iron	8 Co	ncrete tile	CASING	JOINTS: Glue	d Clamped	
1 Stee	el	3 RMP (SI	R)	6 Asbestos-Cement	9 Oth	ner (specify belo			led	
②PVC		4 ABS		7 Fiberglass					aded 🗶	
Blank casing	g diameter	20	.in. to 5.	ft., Dia	in.	to	ft., Dia		in. to	
Casing heig	tht above la	and surface	<i>O</i>	in., weight		•	/ft. Wall thicknes	ss or gauge N	10. SCH 40	
TYPE OF S	CREEN O	R PERFORATION	N MATERIAL:			PVC	10 /	Asbestos-ceme	ent	
1 Stee	el	3 Stainless	s steel	5 Fiberglass	8	RMP (SR)	11 (Other (specify)		
2 Bras		4 Galvaniz		6 Concrete tile		ABS		None used (or	pen hole)	
		RATION OPENIN			zed wrapped	i i	8 Saw cut		11 None (open hole)	
	itinuous slo		ill_slot)		wrapped		9 Drilled hole			
	vered shutt	ter 4 Ke ED INTERVALS:	ey punched From	7 Torc		<i>I</i> E 0			to	
What is the	rals:🕏 roi		ft. to contamination:	ft. to Cement grout ft. SFom		t. to	Other	14 A		
2 Sewer lines 5 Cess pool				8 Sewage lagoon		12 Fert	12 Fertilizer storage		16 Other (specify below)	
3 Wate	ertight sew	er lines 6 Seep	age pit	9 Feedyard		13 Inse	cticide storage	Conta	minated Site	
Direction fro							any feet?	5		
FROM	то		LITHOLOGIC	LOG	FROM	ТО		PLUGGING I	NTERVALS	
F	.50	Sandy Silt								
3.50 15		Sand (SP)								
5.00	TD	End of Bor	rehole							
						F	ush Mount			
						Wa	iver			
						D.	Taylor		(a (
							-4/11/96	5-14	-76	
CONTRA	ACTOR'S	OR LANDOWNER	R'S CERTIFICAT	ION: This water well w	vas (1 cons	structed. (2) rec	onstructed, or (3	3) plugged und	der my jurisdiction and wa	
completed o	n (mo/dav/	year) 4/30	document.						owledge and belief. Kansa	
Vater Well	Contractor'	s License No.	/96			was completed				
inder the bi	usiness na	me of	585					WiD M	lux-	
INICTOLICA	TIONS: Use tv	pewriter or ball point r	pen PLEASE PRESS	FIRMLY and PRINT clearly P	lease fill in blan	ks, underline or circ	e the correct answer	s. Send top three	copies to Kansas Department	
INSTRUCT			T 1600				WNER and retain on	- for wave record		