		WATER WE	LL RECORD	Form WWC-	5 KSA 82	a-1212			
LOCATION OF WA		Fraction			ction Number	0'0	ber	Range Number	
County: Pawne			SW 14 SW		17	т 22	s	R 16 EW	
	n from nearest town or 1th of Larned		s of well if locate	d within city?					
	WNER: Raymond								
RR#, St. Address, Bo		11101				Board of Agri	culture Div	sion of Water Resources	
	: Larned.	Ks. 6755	o o			Application N		5.51. 5. Water 7.6554.655	
LOCATE WELL'S I	N BOX: Dept	h(s) Groundwater L'S STATIC WAT	Encountered 1 ER LEVEL	8 12 . ft. 1	ft. pelow land su	2	ft. 3 o/day/yr .		
	Est.	YieldNA	gpm: Well wate	erwas	ft. a	ıfter	ours pump	ing gpm ing gpm	
<u>•</u> w		L WATER TO BE		5 Public wat		8 Air conditioning		ection well	
- 1 sw	! 6	Domestic	3 Feedlot	6 Oil field wa	ter supply	9 Dewatering	•	or (Specify below)	
l l ""	36 1	2 Irrigation	4 Industrial	7 Lawn and	garden only	10 Observation well	Sto	ck	
×	Was	a chemical/bacteri	iological sample :	submitted to D	epartment? Y	esNo x	; If yes, m	o/day/yr sample was sub-	
,	s mitte	<u>d</u>	-		Wa	ter Well Disinfected?	Yes HTH	No	
TYPE OF BLANK	CASING USED: 3 RMP (SR)	5 W	rought iron	8 Conci			S: Glued .	xClamped	
1 Steel		6 Asbestos-Cement 9 Other (specify to			w)	Welded			
a PVC	4 ABS		berglass					d	
								to ft.	
			eight					258	
	YPE OF SCREEN OR PERFORATION MATERIAL:			D PVC			10 Asbestos-cement		
	1 Steel 3 Stainless steel			5 Fiberglass 8 RMP (SR)			11 Other (specify)		
2 Brass	4 Galvanized ste		oncrete tile	9 AE	S	12 None i	•	•	
	PRATION OPENINGS A			ed wrapped		08 Saw cut	1:	None (open hole)	
1 Continuous sl				wrapped		9 Drilled holes			
2 Louvered shu	, ,		7 Torch	-					
GRAVEL PA	Fr	om	ft. to		ft., Fro	m	ft. to	ftft.	
		om	ft. to				ft. to	ft.	
GROUT MATERIA	L: 0 Neat cemen	t 2 Cen	nent grout	3 Bento					
Grout Intervals: Fro	m	10	t., From					ft. to	
	ource of possible contai					tock pens		doned water well	
O Septic tank	4 Lateral line	s	7 Pit privy		11 Fuel	storage	15 Oil w	ell/Gas well	
2 Sewer lines 5 Cess pool			8 Sewage lagoon		12 Fertilizer storage 16 Other (specify below)				
3 Watertight sev	wer lines 6 Seepage pi	it	9 Feedyard		13 Insec	ticide storage			
Direction from well?	West				How mai	ny feet?	10	00	
FROM TO		HOLOGIC LOG		FROM	TO	LIT	HOLOGIC	LOG	
0 3	Sandy top s								
3 11	Sandy brown		d fine sa	ınd					
11 40	Sand and gr	cavel							
				<u> </u>					
W-12-21-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-									
						- VALUE			
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				ļ		This draw			
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	<u>L</u>								
CONTRACTOR'S	OR LANDOWNER'S CE	RTIFICATION: TI	his water well wa	as (0 constru	cted, (2) reco	nstructed, or (3) plug	ged under	my jurisdiction and was	
ompleted on (mo/day Vater Well Contractor Inder the business na	/year)	27-82 L34 cantz-Bemi	. This Water W	ell Record wa	and this records completed of by (signat	rd is true to the best of on (mo/day/yr) ure)	f my knowle 2. -	edge and belief. Kansas 1.0-82	
NSTRUCTIONS: Use	typewriter or ball point p Department of Health ar	en, <i>PLEASE PRE</i>	SS FIRMLY and	PRINT clear	y. Please fill ir	blanks, underline or	circle the co	rrect answers. Send top	