WATEI	R WELL	RECORD	Form WWC-5	Division o	of Water Resources; App. No.		
1 LOC	ATION O	F WATER WELL:	Fraction	Section Num		Range Number	
County: Figure 7			SE 1/4 SE 1/4 SE 1/4	2		R 29 E	
1 LOCATION OF WATER WELL: Fraction Section Number Townsh County: SE1/4 SE1/4 SE1/4 SE1/4 SIGNATION OF WATER WELL: Fraction Section Number Townsh T J J Distance and direction from nearest town or city street address of well if Global Positioning Systems							
locate	ed within c	ty? From Dighto, 33 then 18 mile was	miles south on				
Hw	7.23,	then 18 mile was	Longitude:	Longitude:			
2 WA	TER WEL	LOWNER: といる/ Di/	'/	Elevation:			
RR#	, St. Addre	ss, Box # : Box 1242	2	Datum:			
City,	State, ZIP	Code : Garden C.	ty, KS 67846	Data Collec	ction Method:		
3 LOC	ATE WEI	L'S 4 DEPTH OF COME	PLETED WELL	40	ft.		
LOCATION							
WIT	WITH AN "X" IN Depth(s) Groundwater Encountered (1)						
SEC	SECTION BOX: WELL'S STATIC WATER LEVEL						
	Pump test data: Well water wasft. after						
		Est. Yieldgpm	: Well water was	ft. after	hours pumping	gpm	
NV	V NE -	WELL WATER TO B	E USED AS: 5 Public wat	er supply 8	8 Air conditioning 11 Ir	ijection well	
WELL WATER TO BE USED AS: 5 Public water supply WELL WATER TO BE USED AS: 5 Public water supply By Domestic 3 Feedlot 6 Oil field water supply WELL WATER TO BE USED AS: 5 Public water supply Domestic 3 Feedlot 6 Oil field water supply WELL WATER TO BE USED AS: 5 Public water supply Domestic 3 Feedlot 6 Oil field water supply WELL WATER TO BE USED AS: 5 Public water supply Domestic 3 Feedlot 6 Oil field water supply WELL WATER TO BE USED AS: 5 Public water supply WELL WATER TO							
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well							
SW	SW SE W W SE W W SE W SE W W SE W W SE W W W W W W						
Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs Sample was submitted							
	S	— Sample was submitted	······ vv	ater well distille	ccicu? Tes No		
	~				LADIA TARIMA AL I		
5 TYPE	E OF CAS	ING USED: 5 Wrought 1 3 RMP (SR) 6 Asbestos-7 Fiberglass	fron 8 Concrete ti	le C.	ASING JOINTS: Glued	.C Clamped	
	Steel	3 RMP (SR) 6 Asbestos-	Cement 9 Other (spec	ify below)	Welded	1	
Dlank as	PVC	4 ABS / Fiberglass	A Diameter		Inreade	in to A	
Blank casing diameter							
				108./1t. vv	van unekness of guage No.		
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass 7PVC 9 ABS 11 Other (Specify)							
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE:							
1 Continuous slot 3 Mill slot 5 Guazed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)							
2 Louvered shutter 4 Key punched 6 Wire wrapped (8) aw Cut 10 Other (specify)							
SCREEN-PERFORATED INTERVALS: From							
From							
From ft. to ft., From ft. to ft.							
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
What is the nearest source of possible contamination:							
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify							
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below)							
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well							
		1?	•				
FROM	ТО	LITHOLOGIC	CLOG FRO	OM TO	PLUGGING IN	TERVALS	
0	2	Topsoil					
20 38	20 38	Tau clau					
20	38	Course Sand			137		
38	40	Shale			RECEI	/ [pas	
						VED	
					OCT 10 a	2000	
					102	JU06	
					BUREALIOT		
					RECEIVOCT 16 2	ATER	
7 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) (1.4/.06) and this record is true to the best of my knowledge and belief.							
Kansas Water Well Contractor's License No 533 This Water Well Record was completed on (mo/slav/year)/10/12/06							
under the business name of Cantian Water Well by (signature) INSTRUCTIONS: Use typewrite or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fift in blanks, under the or cacle the correct answers. Send top							
three coni	CTIONS: U	se typewriter of ball point pen. PLEA	ISE PRESS FIRMLY and PRINT	clearly. Please fill i	in blanks, under the or cacle the	correct answers. Send top	
three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at							
http://www.kdhe.state.ks.us/geo/waterwells.							