| | WATER WELL REC | ORD Form WWC-5 | | D No | | |
|---|--|---|-----------------------------------|--|---|--|
| 1 LOCATION OF WATER County: | WELL: Fraction 1/4 | NE 14 NW 14 | Section Numb | Township Num | nber Range Number S R 5 E/W | |
| Distance and direction from nearest town or city street address of well if located within city? | | | | | | |
| 2 WATER WELL OWNER: | Anita Char | , | | | | |
| City. State. ZIP Code : | 4107 Shelburi | K < | | Application No | culture, Division of Water Resources umber: | |
| 3 LOCATE WELL'S LOCAT | ION WITH 4 DEPTH OF C | OMPLETED WELL | .O ft. ELE | VATION: | | |
| AN "X" IN SECTION BOX | : Depth(s) Groun | dwater Encountered , 1 | | ft. 2 | m., ft. 3 ay/yr. 9-10-04 | |
| × | Pun | np test data: Well water | was | ft. after | hours pumping gpm | |
| NW N | | | was ublic water supply | ft. after 8 Air conditioning | hours pumping gpm 11 Injection well | |
| 1 | 1 Domestic | 3 Feedlot 6 C | oil field water supply | 9 Dewatering | | |
| W | E 2 Irrigation | 4 Industrial 7 D | omestic (iawn & garde | en) To Monitoring Well | | |
| sw s | vvas a chemical/bacteriological sample submitted to Department: Tes No | | | | | |
| mitted Water Well Disinfected? Yes X No | | | | | | |
| 5 TYPE OF BLANK CASI | | 5 Wrought iron | 8 Concrete tile | | TS: Glued Clamped | |
| | 3 RMP (SR) 4 ABS | 6 Asbestos-Cement 7 Fiberglass | 9 Other (specify be | | Welded Threaded | |
| Blank casing diameter | 5in. to | 5.0 ft., Dia | in. to | ft., Dia | Threaded in. to,ft. | |
| Casing height above land so | urface | in., weight | | | s or guage No21.4 | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | 5 Fiberglass 7 PVC 8 RMP (SR) | | 10 Asbestos-Cement 11 Other (Specify) | | |
| 1 Steel 3 Stainless Steel 2 Brass 4 Galvanized Steel | | 6 Concrete tile 9 ABS | | 12 None used (open hole) | | |
| SCREEN OR PERFORATION | ON OPENINGS ARE: | 5 Guazed wrapped | | 8 Saw cut | 11 None (open hole) | |
| 1 Continuous slot2 Louvered shutter | 7 Torch | 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify) | | | | |
| SCREEN-PERFORATED INTERVALS: From 50 ft. to 90 ft., From ft. to 50 ft. from ft. to 50 ft. from ft. to 50 ft. | | | | | | |
| GRAVEL PACK IN | From NTERVALS: From | 7.0 ft. to | | romrom | ft. to | |
| GIINVEETAGICII | From | ft. to | ft., F | rom | ft. to ft. | |
| 6 GROUT MATERIAL: | 1 Neat cement | 2 Cement grout | 3 Bentonite | 4 Other Hale | Hug | |
| | | | | ft., From | ft. toft. | |
| What is the nearest source | of possible contamination: | | 10 Li | vestock pens | 14 Abandoned water well | |
| 1 Septic tank | 4 Lateral lines | 7 Pit privy 11 | | uel storage | 15 Oil well/Gas well | |
| 2 Sewer lines 5 Cess pool | | 5 5 | | ertilizer storage 16 Other (specify below) | | |
| 3 Watertight sewer line Direction from well? | es 6 Seepage pit | • | | ecticide storagenany feet? | | |
| FROM TO | ∧ LITHOLOGIC | LOG | FROM TO | | GING INTERVALS | |
| 0 5 K | Jandy Jay | Dry n | | | | |
| 5 12 5 | eding In | Clay & to | re Sand | My | | |
| 10 90 | tun Clay & | tre san | d My | | | |
| | TAP PARA | | | | | |
| | | 117 · 12 · 42 · 1 | | | ANNUAL | |
| | | , | | RE | CEIVED | |
| | | | 2.11 | OC. | OCT 1 3 2004 | |
| | | | | | | |
| | Wilder | . 10/440 | | BUREAU OF WATER | | |
| | The state of the s | | 70.70.70. | - | | |
| 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) ———————————————————————————————————— | | | | | | |
| Water Well Contractor's Lice under the business name of | // | the Benes | | by (signature) | m Dulana | |
| INSTRUCTIONS: Use typewriter | or ball point pen. PLEASE PRESS F | IRMEP and PRINT clearly. Please | fill in blanks, underline or circ | e the correct answers. Send top | three copies to Kansas Department of Health | |
| and Environment, Bureau of Wat records. Fee of \$5.00 for each <u>c</u> | | on St., Suite 420, Topeka, Kansas | 66612-1367. Telephone 785- | 290-3522. Send one to WATER V | VELL OWNER and retain one for your | |