			TER WELL REC	ORD For	m WWC-5	KSA 82a					<del></del>			
1 LOCAT	ION OF WA	TER WELL:	Fraction				ction Number	To	wnship Nu	mber	Ra	ange Num	nber	
County:	Reno		SE 1/4	NE 1/4	SE 1/2	4	23	Т Т	22	S	R	6	EW	
Distance and direction from nearest town or city street address of well if located within city?														
1'14 m. Nof Hutchinson - 6027 N Monroe														
		7 ' 7	m, No	- Hutc	hinso	n -	6021	_/V	170 nr	oe				
2 WATER	R WELL OW	NER:	arvey Ea	liger										
BB# St Ac	ddress, Box	#	27 NM	1000				В	oard of Agr	iculture l	Division of	Water R	esources	
City, State,									pplication N		DIVISION	valor 11	Coodicco	
Oity, State,	ZIF Code	HU	tch, Ks	6/302										
3 LOCATE	WELL'S LO	CATION WITH	4 DEPTH OF C	OMPLETED	ورWELL	<b>6</b>	ft. ELEVA	TION:	• • • • • • • • • • • • • • • • • • • •	••••••				
AN "X" IN	SECTION	BOX:	Depth(s) Groun	ndwater Encou	untered 1	۱	ft	. 2		ft. 3	3		ft.	
	N.		WELL'S STATI	C WATER LE	VEL	ft. bel	ow land surfac	e measu	red on mo/	day/yr	1-18	-05		
	1	'	Pui	nn test data:	Well water	was a	ft.	after	114	hours r	oumpina	30	apm	
	1		Fet Viold	anm:	Well water	was	ft	after		hours r	numning		gpm	
	-NW -	- NE	Est. Yield gpm: Well water was ft. after hours pumping gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well									gp		
	1	1	Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)									.w)		
W	1	<del></del>	2 iiiigauoii	4 IIIuusi	ilai / L	Joinestic (la	wii a gaideii)	TO IVIOLII	toring wen.					
	1	· •												
	-sw -	- SE -1	Was a chemica	l/hacteriologic	ral samnle s	ubmitted to	Department?	Ves	No &	· If ves r	no/day/yr	sample	was sub-	
Was a chemical/bacteriological sample submitted to Department? Yes Nok; If yes, mo/day/yrs sample was submitted Water Well Disinfected?														
Water Weil Distributed													1	
S														
5 TYPE C	DE BLANK C	ASING USED:		5 Wrought i	ron	8 Concr	oto tilo		ASING JOIN	ITC: Clu		Clampac		
$\square$						- +			ASING JOIL		<del>:</del> u . <b>,⊼.</b> ded			
1 Stee		3 RMP (SI	H)	6 Asbestos			(specify below							
<b>E</b> PVC		4 ABS		7 Fiberglass							eaded			
			in. to											
			12											
l .		R PERFORATIO		,		(Dr)				estos-Cer				
				E Eiberglee	_		MP (SR)						i	
1 Stee		3 Stainles	<u> </u>								y)			
2 Bras	ss	4 Galvaniz	zea Steei	6 Concrete	tile	9 AE	35		12 None	e usea (o	pen hole)			
SCREEN C	OR PERFOR	ATION OPENI	NGS ARE:		5 Guaze	ed wrapped		<b>®</b> Sav	v cut		11 Non	e (open h	nole)	
	tinuous slot		fill slot			wrapped			led holes			` '	,	
					7 Torch				er (specify				ft.	
2 Louv	vered shutte	4 K	ey punched											
SCREEN-F	PERFORATE	D INTERVALS	: From	26	ft. to	3. <b>6</b>	ft., From			ft. to	o		ft.	
			From		ft. to		ft., From			ft. to	o		ft.	
	GRAVEL PAG	CK INTERVALS	: From	23	ft. to	<b>3</b> .8	ft., From			ft. to	o		ft.	
			From		ft. to		ft., From	I		ft. to	o		ft.	
6 GROU	T MATERIA	L: 1 Nea	t cement	2 Cemen	t arout	<b>⊘</b> Ber	ntonite	4 Other.						
Grout Inter			ft. to	3 # 5	om									
				II., FI	OIII									
What is the	e nearest sou	arce of possible	contamination:				10 Lives	tock pen	S		Abandone		vell	
Septic tank 4 Late			ral lines		7 Pit privy		11 Fuel:	storage		15	Oil well/G	as well		
2 Sewer lines 5 Ces						agoon	12 Fertil	izer stora	ae	16	Other (spe	ecify belo	w)	
3 Watertight sewer lines 6 See			-			-	13 Insecticid							
1	_		bage pit		ı			·						
Direction fr	om well?	5w				_	How mai	ny feet?	134					
FROM	ТО		LITHOLOGIC	LOG		FROM	ТО		PLU	GGING II	NTERVAL	S		
		<i>G</i> 4					<del>                                     </del>							
0	3	Jandy	Br Sili											
3	14	BrYG	Grave,											
14	34	Sand +	Crave	/										
34	38	Shale												
	30	unale					<del>                                     </del>				•••			
							ļ l							
-														
						<del></del>								
							<del>                                     </del>							
7														
☐ CONTR	ACTOR'S O	R LANDOWNE	R'S CERTIFICA	TION: This w	ater well wa	as(1))const	ructed, (2) rec	onstructe	d, or (3) pl	ugged ur	nder my ju	ırisdiction	and was	
completed of	on (mo/day/y	ear) /	18-05			<b>~</b>	and this re	ecord is tr	ue to the be	st of my k	nowledae	and belie	ef. Kansas	
Motor Mai	Contractor's	Licones No	447		This Motor	Well Boss	l was complete	nd on /m	\day\ur\	1-3	4-05			
1					iiis vvater	AAGII LIGCOLO								
under the b	usiness nam	e of /7.	·ller Dril	ling			by	(signatur	e) 4	na	lla			
INSTRUCT	TIONS: Use type		en. <i>PLEASE PRESS F</i>		Clearly, Please	fill in blanks. ur	nderline or circle the	correct ans	swers. Send to	three copie	es to Kansas	Department	of Health	
and Enviro	nment, Bureau o	of Water, Geology Se	ection, 1000 SW Jacks	on St., Suite 420,	Topeka, Kansas	66612-1367. T	elephone 785-296-	5522. Send	one to WATER	WELL OWN	NER and reta	in one for yo	our	
1		ach constructed well												