				R WELL RECORD	Form WW	C-5 KSA 82a	-1212		
		TER WELL:	Fraction	<i>,</i> ,		Section Number	Township Number	Range Number	
County:	farve	<i>Y</i>	SE 1/4	SE 1/4 ddress of well if loo	SE 1/4	<u> 35</u>	<u>т 23 s</u>	R 2 EW	
	and direction E_{GS}			ddress of well if loo		y?	ML	7-7	
2 WATER	R WELL OW	NER IJA	d's Soni	rice Sta	tion		70100		
RR#. St. A	Address, Box	(# :		,, ,, ,,	,,,		Board of Agriculture	e, Division of Water Resources	
City, State, ZIP Code Halstead, KS						Application Number:			
3 LOCATE AN "X"	E WELL'S LO IN SECTION	OCATION WITH N BOX:							
, r	<u> </u>	1						. 3	
lt l	_ i								
-	- NW	NE						pumping gpm pumping gpm	
1	!							in. toft.	
₩ W ⊢	<u>'</u>	E		OBE USED AS:	_				
-	_ i		1 Domestic				8 Air conditioning		
	- SW	SE	1	3 Feedlot			9 Dewatering 1		
	!	الر !	2 Irrigation	4 Industrial		•	_		
<u> </u>		<u> </u>		bacteriological sam	pie submitted to			es, mo/day/yr sample was sub-	
E TYPE C		CASING USED:	mitted	E Manual in	0.0-		ter Well Disinfected? Yes		
			·D\	5 Wrought iron		ncrete tile		•	
1 Ste		3 RMP (S	(H)	6 Asbestos-Ceme		er (specify below		elded	
(2)PV	C	4 ABS	12	7 Fiberglass		· • • • • • • • • • • • • • • • • • • •	<u>.</u>	readed	
Blank casir	ng diameter		in. to	ft., Dia	in.	to	ft., Dia	in. to ft.	
				.in., weight				No	
		R PERFORATIO			_	PVC	10 Asbestos-ce		
1 Ste		3 Stainles		5 Fiberglass		RMP (SR)	• •	fy)	
2 Bra		4 Galvani:		6 Concrete tile		ABS	12 None used	(open hole)	
_		RATION OPENIN			auzed wrapped	j	8 Saw cut	11 None (open hole)	
	intinuous slo		Aill slot		/ire wrapped		9 Drilled holes		
	uvered shutt		(ey punched		orch cut				
SCREEN-F	PERFORATE	ED INTERVALS:						t. toft.	
_								t. toft.	
	BRAVEL PA	CK INTERVALS		<i>[</i> ft. t	io 2 . 5 .	ft., Fro	m fi	t. toft.	
		· · · · · · · · · · · · · · · · · · ·	From	ft. t	to	ft., Fro		t. to ft.	
		.: 1 Neat		2 Cement grout	Ø 8e	ntonite 4			
				3 ft., From	f	t. to		ft. to ft.	
What is the nearest source of possible contamination:						stock pens 14 Abandoned water well			
1 Septic tank 4 Lateral lines				7 Pit privy				Oil well/Gas well	
	wer lines		s pool	8 Sewage	lagoon	n 12 Fertilizer storage 16 Other (specify below)			
l	-	er lines 6 Seep	· ' • • •	9 Feedyar	d	13 Insec	ticide storage	Other (specify below)	
Direction for		North				How ma			
FROM	TO	01	LITHOLOGIC		FROM	ТО	PLUGGING	SINTERVALS	
$\cup \mathcal{O}_{-}$	17.5	Glay	WISITT	, dark br	own			INTERVALO	
					1				
17.5	25,0	Clay	WITH MY	dium sun	4				
		gray,5	h brown						
		,		· · · · · · · · · · · · · · · · · · ·					
ļ									
7 CONTE	RACTOR'S	OR LANDOWNE	R'S OFRTIFICATI	ON: This water wa	all was 10 core	tructed (2) reco	instructed or (3) alreaded in	under my jurisdiction and was	
	on (mo/day/		1/99	OH. THIS WATER WE	_			knowledge and belief. Kansas	
1		s License No	656	This Make			on (mo/day/yr)	U 199	
l	business na	01	arles Hans			was completed		12/20 12/2	
			. , ,	ı.				Hanger	
of Health	h and Environm	pewriter or ball point ent. Bureau of Water	Toneka Kansas 6662	<u>imiviLit</u> and <u>FRINI</u> clearly 0-0001 Telephone: 913-3	y. riease till in blan 296-5545. Send one	to WATER WELL OF	the correct answers. Send top thr MNER and retain one for your reco	ee copies to Kansas Department	