		<u> </u>	WATER V	VELL RECORD	Form WWC-5	KSA 82a	-1212			
LOCAT	TON, OF WA	TER WELL:	Fraction	/	Sec	tion, Number	Township Nur	mber	Range Number	
County:	HAmil	10 N	NE WA	15 1/2 D	£ 1/4	<i>3</i> .5	T 22	s	R 4/2_ EW)	
Distance and direction from nearest town or city street address of well if located within city?										
HAVION 8/2 West of SyrAcuse										
				gracus a	-					
2 WATE	R WELL ÓV	VNER: Du An e	mt //ed D							
F	Address De	"" Dane C	- MALLE	Box 213-	_		Decreed of Am	alauda aa Disi	aiaa at Wataa Baaaaaa	
RR#, St. Address, Box #: City. State, ZIP Code: Syr4 645 KS 62828 Application Number: H M 0032										
City, Stat	e, ZIP Code	: -3974	20 5 5 5 T	61010			Application	Number: H	M0032	
B LOCAT	TE WELL'S L	OCATION WITH 4	DEPTH OF COM	IDI ETED WELL	//>		TION:			
H AN "X	' IN SECTIO	N BOX:	DEI III OI OON		1-2-	. II. LLEVA				
		N De								
	ı	[ELL'S STATIC W	ATER LEVEL 2	~ 7 ft. b	elow land sur	face measured on r	no/day/yr 🏾 🕏	1-/5-8/	
l I	ı	1 1 1 1								
	Pump test data: Well water was ft. after hours pumping gpm									
	Est. Yield . S.O.D. gpm: Well water was hours pumping gpm									
<u></u>	I Bore Hole Diameter. 30. in. to									
W W	1	WELL WATER TO DE LIGER AG 5 D. HE. WATER TO DE LIGER AG								
-										
	sw	se	1 Domestic	3 Feedlot	6 Oil field was	er supply	9 Dewatering	12 Ott	er (Specify below)	
		1 - 7 - 1	// Irrigation	4 Industrial	7 Lawn and g	arden only	10 Observation well			
	i	l i l w	as a chemical/bac	teriological sample	submitted to De	nartment? Y	es No X	· If ves m	o/day/yr sample was sub-	
į į	<u> </u>			onergious oumpro	00000 10 01	-	•	- 5	'''''	
—		•	itted			wa	ter Well Disinfected		No	
5 TYPE	OF BLANK	CASING USED:	5	Wrought iron	8 Concre	te tile	CASING JOIN	ITS: Glued .	Clamped	
Γ 1s	teel	3 RMP (SR)	6	Asbestos-Cement	9 Other	specify below	v)	Welded	'	
₹2 P		, ,					•		·	
		4 ABS		Fiberglass			• • • • • • • • •		d	
Blank cas	sing diameter	′ <i> i</i> n.	. to	ft., Dia	in. to		ft., Dia	in.	to ft.	
Casing h	eight above I	and surface/	.2in.	. weight			ft. Wall thickness or	gauge No.	1/4"	
		R PERFORATION I		,g	7 DV	2			12	
i						5	10 ASDE	stos-cement	į	
1 S	teel	3 Stainless st	teel 5	Fiberglass	8 RM	P (SR)	11 Other	r (specify)		
1 2 B	rass	4 Galvanized	steel 6	Concrete tile	9 AB	3	12 None	used (open	hole)	
SCREEN	OD DEDEO	RATION OPENINGS			zed wrapped	_	8 Saw cut		· · · · · · · · · · · · · · · · · · ·	
						_		I	1 None (open hole)	
10	continuous sk	ot 3 Mill s	slot	6 Wire	wrapped		9 Drilled holes		1	
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)										
SCREEN-PERFORATED INTERVALS: From 20ft. to										
SOMELIN	- LIN ONA	ED INTERVALO.								
			From	ft. to .	• • • • • • • • • • • • • • • • • • • •	ft., Fro	m	ft. to.		
	GRAVEL PA	CK INTERVALS:	From	ft. to .		ft Fro	m	ft. to.		
			From	ft. to	•		m			
al oper	T AAATEDIA								ft.	
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other										
Grout Inte	ervals: Fro	m / D ft.	to	. ft., From	ft.	to	ft., From		ft. to	
What is t	he nearest s	ource of possible co	ntamination.			10 Lives	tock pens	14 Abar	ndoned water well	
1		•		7 Dit maiore			•		1	
1 Septic tank 4 Lateral lines				7 Pit privy			storage		vell/Gas well	
2 S	ewer lines	5 Cess po	ool	8 Sewage lagoon			12 Fertilizer storage 16 Other (specify below)			
lзv	Vatertiaht sev	ver lines 6 Seepage	e pit	9 Feedyard		13 Insec	ticide storage .	Im	· 	
l .	_		- p	0 . 000,0.0			,			
	from well?	T	1.171101.0010.1.0			How ma				
FROM	ТО		LITHOLOGIC LO	<u>G</u>	FROM	TO		ITHOLOGIC	LOG	
	22	Duerbu	den							
10	クム	0.0.0								
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<u> </u>	<u>. l</u>	<u> </u>	-			L L			· · · · · · · · · · · · · · · · · · ·	
7 CONT	RACTOR'S	OR LANDOWNER'S	CERTIFICATION	This water well u	vas IT Konetru	12) re~	nstructed or (3) sh	inned under	my jurisdiction and was	
11 OOM	1	SIT DINDUNINERS	- <i>91</i> 7							
1		r/year) . 4 20							ledge and belief. Kansas	
Water We	ell Contractor	's License No	SO	This Water V	Vell Record wa	s completed	on (mo/day/{/r/ .//.	-20-8	7 	
1		ame of Fulton	Drilling			by (signa		ククグ	4	
INICTO	CTIONS: Us-	hypowriter or hell point a		IDMI V and DDINT -1-	arly Diago fill :-	Janke underlie	e or circle the correct	XII	op three copies to Kansas	
i indiri	OSU IONO: USE	ypewiller of ball point pe	DII. FLEMOE PR G OS F	HINTE I AND PRINT CIE	any. riease iii in i	nains, urideriin	e or circle the correctat	IDMERS/ DENG!	p unee copies to nansas	

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRISS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.