WATI	ER WELL R	ECORD		Form WW	/C-5	Divisio	n of Wate	r Resources; App. No.		
		ATION OF WATER WELL: y: Yend		Fraction NW 1/4 WW 1/4		Section Number		Township Number T S		
	tance and direct ated within city?		earest town or	city street address o	f well if	Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: Longitude:				
2 W	ATER WELL (OWNER: Box # :	Holy CI	Todewood		Elevation Datum:	n:			
	y, State, ZIP Co		Ville	an har l	7562	-Data Col	llection l	Method:		
LO WI	CATE WELL' CATION TH AN "X" IN CTION BOX:	Depth(WELL Est. Y	Depth(s) Groundwater Encountered (1)							
W:	SW SE	E 1 Don 2 Irrig Was a Sample	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well							
TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued										
SCREEN-PERFORATED INTERVALS: From										
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Intervals: From										
Direct FROM			LITHOLOG		FRON	ny feet?	Τ .	PLUGGING INT	ERVALS	
					30	3		entingt		
					3	0	(emen		
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)										
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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, 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 <u>constructed</u> well.										