		TER WELL REC	ORD Form WWC-5	KSA 82a-				
1 LOCATION OF		Fraction		Se	ction Number	Township Number	Range Number	
County: Ren	0	JE1/4	NEW 1/4 NW	1/4		T 23 S	R 6 EW	
Distance and direction from nearest town or city street address of well if located within city?								
2 WATER WELL OWNER: Dee Stricker								
RR#, St. Address, E City, State, ZIP Cod	lox # :	204 W 2	874			Board of Agriculture Application Numbers	, Division of Water Resources	
City, State, ZIP Code : Hutch, Ks 67502 Application Number:  3 LOCATE WELL'S LOCATION WITH 4 DEPTH OF COMPLETED WELL								
AN "X" IN SECTION BOX:    Depth(s) Groundwater Encountered 1								
	Was a chemical/bacteriological sample submitted to Department? Yes No							
5 TYPE OF BLAN	K CASING USED:		5 Wrought iron	8 Concr	ete tile	CASING JOINTS: GI	ued Clamped	
1 Steel	1 Steel 3 RMP (SR)			9 Other	(specify below)	elow) Welded		
<b>€</b> PVC	4 ABS		7 Fiberglass				readed	
							ft.	
l .			in., weight				age No. 16 O	
TYPE OF SCREEN OR PERFORATION MATERIAL:			<b>⊘</b> P\				0 Asbestos-Cement	
1 Steel 3 Stainless Steel 2 Brass 4 Galvanized Steel			5 Fiberglass 8 RM 6 Concrete tile 9 AE		MP (SR) BS	11 Other (Spec 12 None used (	ify)open hole)	
SCREEN OR PERFORATION OPENINGS ARE: 5 Guazed wrapped Saw cut 11 None (open hole)								
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled ho						9 Drilled holes	``	
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)ft.								
SCREEN-PERFORATED INTERVALS: From								
From								
GRAVEL PACK INTERVALS: From								
						14		
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout								
Grout Intervals: F	rom2	ft. toع	2, ft., From	ft. f	to	ft., From	ft. toft.	
What is the nearest	source of possible	contamination:			10 Livesto	ck pens 14	Abandoned water well	
1 Septic tank 4 Lateral lines			7 Pit privy		11 Fuel sto	orage 15	Oil well/Gas well	
2 Sewer lines 5 Cess pool			8 Sewage lagoon		12 Fertilize	er storage 16	Other (specify below)	
(3) Watertight se	wer lines 6 Seep	age pit	9 Feedyard	Ŀ	13 Insection	cide storage		
Direction from well?	NW				How many	feet? 40		
FROM TO		LITHOLOGIC	LOG	FROM	то	PLUGGING	INTERVALS	
0 9	Br Cla	·						
9 43	Sand:	y Grave	2/					
•								
						RE	CEIVED	
						AUG 2 0 2004		
						BUREAU OF WATER		
						201127	10 01 11/11/21	
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Oconstructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year)								
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS 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, 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 constructed well.								