٧	GGING	G RECORD Form V				WWC-5P	WC-5P KSA 82a-121		ID No	MW-4		
1 LOCATI	ON OF WAT	ER WEL	L: Fi	raction	) ), .					Section Number	Township Numbe	r Range Number
County:	Re	eno	-	SW	1/4	SW	1/4	SE	1/4	11	23	6-West
			earest			-7				cated within city?		
806 W. 4	th Street											
2 WATER	WELL OWN											
1	Address, Bo		19 N. I								•	sion of Water Resources
	, ZIP Code				Kans	as 67	501			Appli	cation Number:	
3 XX IN SI	VELL'S LOC ECTION BO	X:	II II AN	4   <sub>D</sub>	EPTH (	OF WEI	LL		14	. <b>.5</b> ft.		
	N											
	i i	WELL'S STATIC WATER LEVEL 9.94 ft.										
	WELL WAS USED AS:											
<b></b> 1	NW	NE	┨									
		-	Е			Domes				Water Supply	Dewat	
W		· ·					eld Water Supply and Garden (domes	_	oring Well			
			Industr				and Carden (domes					
	10/00 0	ah ami	001/b0 at	e mie le e								
Was a chemical/bacteriological sample submitted to Department? Yes No If yes, mo/day/yr sample was submitted									. NO <u>™</u>			
Water Well Disinfected: Yes No X												
E TYPE O	E DLANK O	A CINIC III	25D:	l								
1 Stee	F BLANK CA	3 RMP		5	Wrough	nt		7 Fiberal	228	9 Other (	specify helow)	
600		4 400		•	A - L 4		1	0.0	4- T	·-		
Blank cas	sing diamete	er <b>2.3</b>	<b>75</b> in.	. Wa	s casin	g pulled	d? Y	'es <b>x</b>		No If yes	, how much?	14.5'
Casing h	eight above	or below	land sui	rface	Unl	knowr	<b>1</b> in	١.		Ove	erdrilled well to 15	5'
Grout Plug Intervals From 0.0 ft. to 1.0 ft. From 1.0 ft. to 15.0 ft. From ft. to ft.												
What is	the nearest	source o	f possibl	le conta	aminatio	on:						
1.00	atia tauli		^	C							46. 045/	f. halawa
				Seepage pit Pit privy			_		orage (former) er storage	16 Other (specif	y below)	
					y ge lago	on				cide storage		
				Feedy	_					oned water well		
5 Ces	ss Pool			-	ock pen	ıs		15 O	il wel	l/ Gas well		
Direction fro	om well?		East					How ma	anv fe	et? 25	5	
		T										
FROM	TO	CODE				PLUG	GING I	MATERIAL	_S			
0.0	1.0		Conc									
1.0	15.0		Bento	onite	chips							
							_					
7 CON	TDAGTGE	0.0011	ND0:::	IED:0	0555							
F-1 0014	TRACTORS no/day/yr)	5 OR LA	MDOM		6ERTI 17/05		ION: T				my jurisdiction and wa	-
1	no/day/yr) er Well Con	tractaria	Licono	/	/1103	Y						ge and belief. Kansas
vvate			11/	7 \ /	T 100	X					Record was comple	
02/19/05 /// under the business name of Quad State Services, Inc. by (signature)												•
			7-7		/9-0	<del>(</del>	4h -				is to Vance Day	
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565.												
	one to Wa									Jpona, Namede 00	ozo oco i. Telepilo	10. 700 200-0000.