LOCATION OF WA		TER WELL REC		Form WWC-	Se	ction Number	Township		Ra	inge Nun	nber
County: RANO		5W 1/4	SW	′ _¼ SV	V 1/4	24	т 23) <u>s</u>	R	6	E/ X (
Distance and direction	from nearest tov	wn or city street	address	of well if locate	ed within city?						
WATER WELL OW	NER:	KSHOD	#	748			MWI				
⊐ RR#, St. Address, Box	# : BN	Main		V.c.			' Board of	Agriculture,	Division of	Water R	esource
City, State, ZIP Code	<u> 5. H</u>	UTCHIA	<u>50 M</u>		1 1505		• •	n Number:			
LOCATE WELL'S LO							ATION:				
AN "X" IN SECTION	BOX:	Depth(s) Grou	ndwater	Encountered	1	low land ourfo	ft. 2 ace measured on n		2/21/	ns	, tt.
1	I	WELL'S STAT	ic wai E imp test (n ∟⊏v⊑L <i>j.</i> data: Wellwa	ii. المتحدد المانية	ft.	after	hours	pumping		gp
1 1	NE I	Est. Yield		pm: Well wa	ater was	ft.	after	hours	pumping		gp
NW -	- NE	WELL WATER			5 Public water 6 Oil field wat		8 Air conditionii 9 Dewatering		Injection w Other (Spe		,, ₄ ,)
w !	! <u> </u> E	1 Domestic 2 Irrigation		Feedlot ndustrial	7 Domestic (la	an suppiy awn & garden)	Monitoring w	ell			•• <i>•</i>
	! -	2ga				, , , , , , , , , , , , , , , , , , ,	Ů				
sw	- SE	Was a chemic	al/bacteri	ological samp	le submitted to	Department?	Yes No	: If ves.	mo/day/yrs	sample	was su
1	1	mitted	all bactor	ological samp	no odbiinilod ii		Water Well Disinfed		,.,.,.	No	
<u> </u>	ŀ										
TYPE OF BLANK	CASING USED:		5 Wro	ught iron	8 Cond	rete tile	CASING J	DINTS: Glu	ed	Clamped	t
1 Steel 3 RMP (SR)			_	estos-Cement		r (specify belo	w)	We	ded		
2PVC	4 ABS			rglass					eaded		
Blank casing diameter		in. to		ft., Dia		in. to	It., L)ıa	Na	n. to	
Casing height above la			in.,	weight	ØF	 VC					
YPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel			5 Fibe	5 Fiberglass		MP (SR)		10 Asbestos-Cement 11 Other (Specify)			
2 Brass	4 Galvani			crete tile	9 A			one used (d			
SCREEN OR PERFO	RATION OPENII	NGS ARE:		5 Gı	uazed wrapped	l	8 Saw cut		11 Non	e (open l	nole)
1 Continuous slot	_	/lill slot			ire wrapped		9 Drilled hole				
2 Louvered shutte	er 4 K	(ey punched	, ,		orch cut		10 Other (spec				
SCREEN-PERFORAT	ED INTERVALS	: <u>F</u> rom	7	ft. to .	/	ft., From	m	ft. t	0		1
GRAVEL PA	CK INTERVALS	ہےFrom From .⊷5			14	It., Froi	m m		0		
5 <u></u>		From		ft. to .		ft., Froi	m	ft. t	o		······································
000171117501					<u> </u>	ntonito /	☑ Other <i>C.e.</i> .	2000-	+ 1)-	-1.5	
GROUT MATERIAGE Grout Intervals: Fro		at cement		ement grout							
What is the nearest so				11., 1 10111			stock pens		Abandone		
1 Septic tank				7 Pit pri	vv		l storage				
2 Sewer lines				•	ge lagoon	-			16 Other (specify below)		
3 Watertight sewer lines 6 Seepage pit				9 Feedy		13 Inse	ecticide storage				
Direction from well?				•		How ma	any feet?				
FROM TO		LITHOLOGI	C LOG		FROM	TO	Р	LUGGING I	NTERVAL	S	
0 0.8'	CONCV	ete a	ove 1	<u></u>							
) 1 5				,					7	,	
0.8' 141		<u>With Si</u>			arscopi				light	rgre	X- 0
	trac						q with de	ptv_			
	gre	y stain	ing	increa	sinawit	4 dept	<u> </u>				-
	 		<u> </u>		<u> </u>	•					
						 	TTuch	1440	<u>~</u>		
							Linzal	nni n r	IV L		
	 						11 1/1 X 11 C	V. 1	n		
							10001C		11		
							1) / QC	J K	K	
									7		
CONTRACTOR'S	OR LANDOWNE	ER'S CERTIFIC	ATION: T	his water wel	I was (1) cons	tructed, (2) re	constructed, or (3)	plugged u	nder my ju	ırisdictior	n and w
									knowledge	and belie	ef. Kans
Vater Well Contractor	s Licence Ńo	751			iter Well Reco			1/ 3	7.10	د	
		MAASSO					/ (signature) 🗸 🗸		, .		

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.