WAT	ER WI	ELL RECORD	Form V	VWC-5	Distance of Dist.			
1 LC	CATIO	N OF WATER WELL:	Fraction	1110-0	Section Number	r Resources App. No		
Co	unty: Re	ono	NE 14 SW 14 N	E ¼ SW ¼	25	Township No. T 23 S	Range Number	
Str	eet/Rural	Address of Well Location;	if unknown distance	& direction	and the second statement of the second statement of the second statement of the second statement of the second			
fro	from nearest town or intersection: If at owner's address, check here $\sqrt{2}$. Latitude:							
			,	Longitude: 097,93406 (in decimal degrees)				
	Elevation: 1511							
2 W	ATER V	VELLOWNER: Bob Ho			- Datum: T WGS 84	I TI NAD 83 171	NAD 27	
RI	t# Street		rvna	Datum: WGS 84, NAD 83, NAD 27 Collection Method:				
Ci	City State ZID Code					GPS unit (Make/Model: Garmin 62S		
	cy, oraco,	So. Hut	chinson. Kansas 67	Digital Map/Photo, Z Topographic Map, Land Survey				
3 LOCATE WELL Est. Accuracy: <a>[<3 m,] 3-5 m, <a>[5-15 m,] >15 m								
WI	THAN "	"X" IN 4 DEPTH OF COMPLETED WELL 44						
SE	CTION B	V_{A} Depunds) (if our day after Enclowing and (1) σ (a)						
	N	WELL'S STATIC WATER LEVEL 18 Pump test data: Well water was						
1	$h_{1} = h_{1} = h_{2} = h_{1} + h_{2} + h_{3} + h_{3} + h_{3} + h_{3} = h_{3$							
W	$\mathbf{v} = \{\mathbf{c} \mid \mathbf{c} \mid$							
	The stand which the DE VOED AS: I Phone water emply I Cootheamal El triation to							
	SW SE L. Domestic L. reculot Oil field water supply Dewatering Clocker (Specific Letter)							
	Li migauon Li industrial VI Domestic-lawn & garden C Monitoring well							
was a coordination of the submitted to Department? The set in the								
II yes, mo/day/yr sample was submitted								
Water well disinfected? I Yes No								
5 TYI	PE OF C	ASING USED: Steel	PVC []	Athan				
CASING JOINTS: VI Glued Clamped Clamped Clamped								
LANDO DISTRIBUTE DE LA LA CARTA DE PARTE LA								
Casing height above land surface. 14 in., Weight .160								
Steel Stainless Steel V PVC Other (Specify)								
La La Cara La Valvallizcu Sicci la None used (onen hole)								
SCREEN OR PERFORATION OPENINGS ARE:								
Louvered shutter Key numbed Win service Cit								
SCREEN-PERFORATED INTERVALS: From								
From ft to Provide Provide Review Rev								
GRAVEL PACK INTERVALS: From								
6 GROUT MATERIAL: □ Neat coment □ Cement grout								
6 GROUT MATERIAL: Section Comparison of Comp								
and the source of possible containination.								
Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)								
17	J Sewer II Watertic	nes Cesspool ht sewer lines Seepage pi	Sewage lagoon	Fuel storage	Abandoned v	vater well	(spanny barring	
		m well West	t [] Feedyard	[] Fertilizer sto	rage Oil well/gas	well	*******	
FROM	PROPERTY DESCRIPTION OF A DESCRIPTIONO OF A DESCRIPTION O	LITHOLOGI	CLOG	Distance fr	om well 80'	******		
0	3	Top soil		FROM	TO LITHO. LOO	G (cont.) or PLUG	GING INTERVALS	
3	13	Brown clay	a nyangati yanga yang anta di anaya ta yang kang ang barang ang barang ang barang kang barang barang barang ba		n an			
13	44	Med small sand and g	royal					
	-	inou. onlan sand and g	Idver			Hardberdanda an	1944 14-19 14 14 14 14 14 14 14 14 14 14 14 14 14	
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antiin intercon kernintimastum)		n an	*****	<u> </u>				
alan tahu kunin kun kun menjakalan			na kan bara ana ana ang kana kan kan kan kan kan kan kan kan ka				A balancies on a program a stranger page for the decision of a strange program of the balancies and an	
77			******	<u> </u>	an a	No de a de parte de la companya de		
	+		and an any log state of the state					
	+		na na anna an an anna an an an an an an					
7 CONTRACTOR'S OR LANDOWNEDDS CEDETURICATIONS								
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, reconstructed, or plugged								
Kansas Water Well Contractor's Licence No. 134 The Well of the second is true to the best of my knowledge and belief.								
Kansas Water Well Contractor's License No. 134								
INSTRUCTIONS: Use the period of the set of t								
(white, bl	ue, pink) te	Kansas Depar tment of Health a	d E nyirönment. Bureau	of Water, Geology	y. Please fill in blanks and Section 1000 SW Inches	d check the correct an	swers. Send three copies	
(white, blue, pink) to Kansas Depar tment of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 666 12-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Vi sit us at								
http://www.kdheks.gov/waterwell/index.html.								