11 1001 1011 05 1111			R WELL RECO	RD Form WV			LUGGING K		
LOCATION OF WATER WELL: RENO		Fraction	NIN	1115	Section Numb		p Number	٠,	Number
County.		/ 7	7000 1/4	NEVI		I T X	3 s	L R	E(W)
Distance and direction		•		located within c	ty?				
759			KS 67501						
	vnem: Laurie								
RR#, St. Address, Bo	ж#: 1526 Fo	rrest				Board	of Agriculture,	Division of W	ater Resource
City, State, ZIP Code			7501			Applic	ation Number:		
LOCATE WELL'S	OCATION WITH 4	DEPTH OF C	OMPLETED WE	20	4 E) E				
MIN Y IN SECTIO									
·	N De	FLUE OTATIO	WARE ENCOURED	10		t. 2 surface measure		4/14/92	2
1 I i									
NW						. after			
[}] 1						. after			
* w	Statement of Street, S					., and		. to	
2		ELL WATER T	MUKROEKIUSED AS		water supply		•	Injection well	
sw	SE V		Was _{3 Foodlot}			9 Dewatering		Other (Special	fy below)
		2 Irrigation	4 Industri			10 Observation			
1	l W	as a chemical/t	pacteriological sc	imple submitted t	o Department?	YesNo.	; If yes	, mo/day/yr sa	ample was sub
	5 mi	lled			V	Nater Well Disinf	ected? Yes X	No	
TYPE OF BLANK	CASING USED:		5 Wrought Iron	8 Cc	ncrete tile	CASING	JOINTS: Glue	d Cla	mped
1 Steel	3 RMP (SR)		6 Asbestos-Ce	ment 9 Ot	her (specify be	low)	Weld	led	
X 2 PVC	4 ABS		7 Fiberglass				Threa	aded	
Blank casing diameter	· 4 in.	to	ft. Dia					in. to	ft.
asing height ########	MONOT surface1e.v.	el	In weight		lb	s /ft Wall thickne	ess or dauge N	0	
			ma, morgan con		PVC		Asbestos-ceme		
/PE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel			5 Fiberglass 8 RMP (SR)			# 1 /			
2 Brass 4 Galvanized steel		6 Concrete tile	• , ,		12 None used (open hole)				
				_			None used (op	-	
SCREEN OR PERFORATION OPENINGS ARE:			5 Gauzed wrapped		o	8 Saw cut		11 None (o	pen noie)
1 Continuous slo				Wire wrapped		9 Drilled hol			
2 Louvered shut	, ,		λ/A	Torch cut	/.	10 Other (sp	ecify)		
CREEN-PERFORAT	ED INTERVALS:	From				rom			
		From				rom			
GRAVEL PA	CK INTERVALS:	From	ft	. to	ft., F	rom	ft. t	o <i></i>	
	The second secon	From	ft	to *	ft., F		ft. t		ft.
GROUT MATERIAL			2 Cement grout	3 B	entonite	4 Other C	ement		
Frout Intervals: Fro	m. ⊘. O ft. :	to	ft., From		t. to	ft., From	1 .	ft. to	
hat is the nearest so	ource of possible con	tamination:			10 Live	estock pens	14 A	bandoned wa	ter well
1 Septic tank	4 Lateral li	nes	7 Pit pri	vy	11 Fue	el storage	15 O	il well/Gas we	ell
2 Sewer lines	5 Cess poo	ol	8 Sewage lagoon		12 Fer	12 Fertilizer storage 16 Other (specify below)			
3 Watertight sew	er lines 6 Seepage	* *			13 Inse	13 Insecticide storage			
irection from well?	, , ,					any feet?			
FROM TO		LITHOLOGIC L	.OG	FROM		ary reets	LITHOLOG	IC LOG	
							2.11.0200		
							COURT	7/27	
							1 - 7/	5 3 	
						7,4		5 11	
						1-16-		<u> </u>	
						<u> </u>			
						A ! AY	<u> 1 1 1998</u>		
						IVITA	7 7 1000	•	
						OIV	SION C)F	
						DIVI		NIT	
						ENA	SION (LIVIT	
					1				
CONTRACTORIS	DI I ANDOMOTE	OFPIEC	N. 1. No. 1.		of Roma Roman				Al
CONTRACTOR'S	DR LANDOWNER'S	CERTIFICATIO	N: This water v	vell was (XX)XXBCBA		CERCIORENCE CARRACTERICA (C	B) plugged und	er my jurisdic	tion and was
mpleted on (mo/day/	year)4/.14/.92				. and this red	cord is true to the	3) plugged und best of my kno	er my jurisdic pyledge and t	tion and was pelief. Kansas
mpleted on (mo/day/ ater Well Contractor)	year) . 4/14/92 s License No		This Wa	iter Well Record	. and this red was completed	cord is true to the d on (mo/day/yr)	best of my kno	wledge and t	pelief. Kansas
mpleted on (mo/day/ ater Well Contractor) der the business nar	year)4/14/92 s License No. me of Advance	Termite 8	This Wa	iter Well Record	. and this red was completed by (sign	cord is true to the d on (mo/day/yr) nature)	best of my kno	owledge and t	pelief. Kansas
mpleted on (mo/day/ ater Well Contractor' der the business nar STRUCTIONS: Use	year) .4/14/92 s License No. me of Advance typewriter or ball point	Termite 8	This Wa Pest Cor	iter Well Record	. and this red was completed by (sign early. Please fill	cord is true to the d on (mo/day/yr) nature)	best of my kno 5/7/9 wells ine or circle the	wiedge and t	pelief. Kansas 1 Wells ers. Send top
npleted on (mo/day/ iter Well Contractor' der the business nar STRUCTIONS: Use	year) 4/14/92 s License No. me of Advance typewriter or ball point Department of Health	Termite 8	This Wa Pest Cor	iter Well Record	. and this red was completed by (sign early. Please fill	cord is true to the d on (mo/day/yr) nature)	best of my kno 5/7/9 wells ine or circle the	wiedge and t	pelief. Kansas 1 Wells ers. Send top