WAT	ER WELI	RECO	ORD	Form WWC-	Form WWC-5 Division of Water Resources; App. No.					
1 LOCATION OF WATER WELL:			Fraction		Section N	umber	Township Number	Range Number		
	County: Harvey		SW14 NW14 SE14				T 248	R 2 E/W		
			om nearest town or cit	y street address of we		Global Positioning Systems (decimal degrees, min. of 4 digits)				
loc	ated within o		A 4/ 4		Latitude:					
1430 Redbud CT				In HalsTead Longitude:						
2 WATER WELL OWNER: Dennis			Mc Donough   Elevation:							
	R#, St. Addre	,	/7,70 K	edbud ct	1	Datum:				
C	ty, State, ZII	Code	Halste	ad, KS 670	56	Data Col	lection	Method:		
3 L(	CATE WE	LL'S 4	DEPTH OF COMP	LETED WELL	9.8		ft.			
LO	<b>OCATION</b>				•					
	WITH AN "X" IN Depth(s) Groundwater Encountered (1)									
SE	SECTION BOX: WELL'S STATIC WATER LEVEL									
N Pump test data: Well water wasft. after										
Est. Yieldgpm: Well water wasft. after hours pumping									gpm	
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well										
w L	W           E   1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify be									
2 Irrigation 4 Industrial Domestic (lawn & garden) 10 Monitoring well										
	SW SE	,,		.1 ! 1 1 1			.0 37	<b>/</b>	TC /1 /	
	Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs									
Sample was submitted										
	S									
5 TY	PE OF CAS			ron 8 Conc	rete tile		CASIN	G JOINTS: Glued		
		3 RMP (		Cement 9 Other						
		4 ABS	7 Fiberglass					Threaded		
Blank casing diameter										
Casing height above land surface										
TYPE OF SCREEN OR PERFORATION MATERIAL:										
1 Steel 3 Stainless Steel 5 Fiberglass QVC 9 ABS 11 Other (Specify)										
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:										
1 Continuous slot 3 Mill slot 5 Guazed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)										
2 Louvered shutter 4 Key punched 6 Wire wrapped Saw Cut 10 Other (specify)										
SCREEN-PERFORATED INTERVALS: From										
From										
GRAVEL PACK INTERVALS: From. 2.2. ft. to										
From										
	OUT MATE		1 Neat cement 2 (	Cement grout & Ber	ntonite 4	Other				
	Intervals:	From			f	t. to	f	t., From	ft. toft.	
What			f possible contaminati		0.7.		10.7		1604 / 10	
	1 Septic tank		4 Lateral lines		0 Livestoo	•			16 Other (specify	
	2 Sewer lines Watertight				1 Fuel sto			oandoned water well	below)	
	ion from wel				2 Fertilize			l well/gas well		
FRON		1	LITHOLOGIC		FROM	TO	7.4	PLUGGING INTI		
	1 10	N L		LOG			0.		ERVALS	
	1/		Cr Clay		100		Dr	Clay		
1/	19	Tan								
			Grey Clay							
24		Crey								
40			Sand + Sn							
60		Tan	Fine San							
68		Light		<u>u</u>						
		Ligar								
70		F-1	M Sand							
20,04										
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Occonstructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year)										
Kanaa	my jurisaicti c Water Well	Contract	tor's License No.	147 This Water	and t Wall Dass	nis record	i is true t	on (mo/dov/veer)	-2 -0 4	
Kansas Water Well Contractor's License No										
under the business name of Miler Drilling by (signature) by (signature) 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										
TIBLE			er or hall noint nen PIEA	SE PRESS FIRMLY and D	RINT clearly	Please fil	llin hMoAl⊳o	underline or circle the co	rrect answers Sand ton	
three co	pies to Kansas I	Department	of Health and Environment	t, Bureau of Water, Geolog	gy Section, 1	000 SW Jac	ekson St., S	Suite 420, Topeka, Kansas 6	66612-1367. Telephone	
three co 785-296	pies to Kansas I	Department one to	of Health and Environment WATER WELL OWNE	t, Bureau of Water, Geolog	gy Section, 1	000 SW Jac	ekson St., S	Suite 420, Topeka, Kansas 6	66612-1367. Telephone	