WATER WELL RECORD	Form WWC-5	Division of Wate	r Resources; App. No.	
1 LOCATION OF WATER WELL: County:	Fraction NW14NE 1/4NE	Section Number	Township Number T 24 S	Range Number R 2 E/W
Distance and direction from tearest town or ci	ty street address of well if	Global Positioning		
Distance and direction from dearest town or city street address of well if located within city? Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: Longitude:				
2 WATER WELL OWNER: Christy	Bact	T1 4*		
RR#, St. Address, Box # : 301 W	10th St.	Datum:		
City, State, ZIP Code :	TO J K	Data Collection	Method:	
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL				
LOCATION				
WITH AN "X" IN Depth(s) Groundwater Encountered (1)				
SECTION BOX: WELL'S STATIC WA	ATER LEVEL	.ft. below land surface measured on mo/day/yr		
		ft. after bours pumping gpm		
WELL WATER TO P	Est. Yieldgpm: Well water wasft. after			
w NW NE' E Domestic 3 Fee		er supply 9 Dev		
	lustrial 7 Domestic (la			
' '	•	,	_	
Sample was submitted Water well disinfected? Yes No				
S				
5 TYPE OF CASING USED: 5 Wrought			G JOINTS: Glued	
		cify below)		•
2 PVC 4 ABS 7 Fiberglass Threaded				
Blank casing diameter				
TYPE OF SCREEN OR PERFORATION MATERIAL:				
1 Steel 3 Stainless Steel 5 Fiberglass PVC 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 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)				
SCREEN-PERFORATED INTERVALS: From				
From				
From				
From				
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other				
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What is the nearest source of possible contamination:				
Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify				
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below)				
3 Watertight sewer lines 6 Seepage pit	<i>a</i> •	ū	oil well/gas well	•••••
Direction from well?		many feet?		TDIALC
FROM TO LITHOLOGIC	LUG FF	ROM TO	PLUGGING INT	ERVALS
2 Coposil			-	
18 30 time san	dy clay			
30 43 med San	of can			
43 60 Clay				
60 120 Med Sand				
	- 40			
T CONTROL CONTROL OF A 12 TO CONTROL OF THE CONTROL	EDDIEG AMOST M.:			4-1(0) 1
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year)				
Kansas Water Well Contractor's License No				
under the business name of Chase Wrilling by (signature) by Chase				
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				
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 constructed well. Visit us at				
http://www.kdheks.gov/waterwell/index.html.				