WATER WELL RECORD	Form WWC-5	Division o	of Water Resources; App. No.	
1 LOCATION OF WATER WELL: County: Rand	Fraction NE/4 SE	_	nber Township Number	Range Number
County: Ron Distance and direction from nearest town or co	ty street address of well	if Global Posit	tioning Systems (decimal d	
located within city?	i OI	Latitude:		
located within city? 92115. Wood 8	erry Kr	Longitude:		
2 WATER WELL OWNER: 7 m Hosk RR#, St. Address, Box # : 11506 5.	Ason 1	Elevation:		
RR#, St. Address, Box # : 11506 5.	Worth Meton	Datum:		
City, State, ZIP Code : they K	467543		ction Method:	
3 LOCATE WELL'S 4 DEPTH OF COM	PLETED WELL	60		
LOCATION				
WITH AN "X" IN Depth(s) Groundwater	Encountered (1)	<i>O</i> ft. (2) ft. (3) surface measured on mo/da	ft_
SECTION BOX: WELL'S STATIC WA	ATER LEVEL	ft. below land s	surface measured on mo/da	ny/yr 8-13-07
N Pump_test data	a: Well water was	ft. after	hours pumping	gpm
			hours pumping	
	BE USED AS: 5 Public	water supply	8 Air conditioning 11 In	
W E Domestic 3 Fee			9 Dewatering 12 C	
2 Irrigation 4 Inc	dustrial 7 Domestic (lawn & garden) 1	0 Monitoring well .	
SW SE			Yes No	,
Was a chemical/bacte	riological sample submit	ted to Department?	Yes No	; If yes, mo/day/yrs
-	1	Water well disinfe	ected? Yes No	
S				
5 TYPE OF CASING USED: 5 Wrought			ASING JOINTS: Glued	
1 Steel 3 RMP (SR) 6 Asbestos		specify below)		
PVC 4 ABS 7 Fiberglas	5		Thread	ed
Blank casing diameter 5 in. to 5. Casing height above land surface	2 ft., Diameter	in. to	ft., Diameter	in. toft.
Casing height above land surface/	in., Weight	lbs./ft. W	all thickness or guage No.	>UX.20
TYPE OF SCREEN OR PERFORATION MATI		OADC	11 04 (0:6-	A
			11 Other (Specify ment 12 None used (ope	
2 Brass 4 Galvanized Steal 6 Con- SCREEN OR PERFORATION OPENINGS AR		10 Asbesios-Cei	ment 12 None used (ope	en noie)
		ch cut 9 Drilled	l holes 11 None (open	hole)
2 Louvered shutter 4 Key punched 6 V	Vire wranned	v Cut 10 Other	(specify)	
2 Louvered shutter 4 Key punched 6 V SCREEN-PERFORATED INTERVALS: From	5.0 ft. to	60 ft. F1	rom ft. to	ft.
From	ft. to	ft., F	rom ft. to	ft.
From GRAVEL PACK INTERVALS: From		<i>60</i> ft., F	rom ft. to	ft.
From	ft. to	ft., F	rom ft. to	ft.
6 GROUT MATERIAL: 1 Neat cement 2	Cement grout Bento	onite 4 Other		
Grout Intervals: From ft. to	,	ft. to	ft., From	ft. toft.
What is the nearest source of possible contamina		T increte als mana	12 Imageticida Ctomoco	16 Other (amonify
Septic tank 4 Lateral lines 2 Sewer lines 5 Cess pool		Livestock pens Fuel storage	13 Insecticide Storage14 Abandoned water wel	16 Other (specify below)
3 Watertight sewer lines 6 Seepage pit	- ·	Fertilizer Storage	15 Oil well/gas well	
Direction from well?			100 well/gas well	
FROM TO LITHOLOGIC		FROM TO	PLUGGING IN	
0 3 700501	0 200	TROM TO	1 DO CONTO II	
3 5 14.0				
5 25 Cooper Gray				
25 35				
35 30 50				
50 60 Meding 5				
Je Je Jegenna Je				
			10 1100	
			_	
7 CONTRACTOR'S OR LANDOWNER'S C	ERTIFICATION: This	water well was	constructed, (2) reconstru	acted, or (3) plugged
under my jurisdiction and was completed on (mo/day/year)				
Kansas Water Well Contractor's License No. 738 This Water Well Record was completed on (mo/day/year) 8				
under the business name of fram of fram the left by they (signature) (to Menny				
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				
	ent Bureau of Water Geology	Section 1000 SW Tack	kson St., Suite 420, Topeka, Kan	sas 66612-1367. Telephone
785-296-5522. Send one to WATER WELL OW				