WATER WELL RECORD	Form WWC-5		Water Resources; App. No.		
1 LOCATION OF WATER WELL:	Fraction	Section Numb			
County: Reno Distance and direction from nearest town or cit	NE14 NE14NW		T 24 S	R 5 E	
located within city?		T -434 1	ning Systems (decimal de		
2 mi E of Yoder		The state of the s	Langitude:		
2 WATER WELL OWNER: John Yoder		Elevation:	Elevation:		
RR#, St. Address, Box # : 210 N Wall		Datum:	Datum:		
City, State, ZIP Code : Buhler	KS 67522	Data Collecti	ion Method:		
3 LOCATE WELL'S 4 DEPTH OF COMP	KS 67522 LETED WELL62		ft.	1941-11-	
LOCATION					
WITH AN "X" IN Depth(s) Groundwater	Depth(s) Groundwater Encountered (1)				
SECTION BOX: WELL'S STATIC WA	WELL'S STATIC WATER LEVEL				
Est. Yieldgpm	Est. Yieldgpm: Well water wasft. afterhours pumpinggpm				
	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well				
W E 1 Domestic 3 Feed					
2 Irrigation 4 Indu	ıstrial 7 Domestic (la	vn & garden) 10	Monitoring well	Stock	
SW SE Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs					
Sample was submitted					
S Sample was submitted.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	dier wen distince	.cd. 103 110	••••	
5 TYPE OF CASING USED: 5 Wrought I:	ron 8 Concrete	ile CA	SING JOINTS: Glued	* Clamped	
1 Steel 3 RMP (SR) 6 Asbestos-0	Cement 9 Other (spe				
QPVC 4 ABS 7 Fiberglass			Threade	d	
Blank casing diameter in. to					
Casing height above land surface					
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:					
	uzed wrapped 7 Torch				
2 Louvered shutter 4 Key punched 6 Wire wrapped 88aw cut 10 Other (specify)					
From					
GRAVEL PACK INTERVALS: From					
From ft. to ft., From ft. to ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout Sentonite 4 Other					
Grout Intervals: From					
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide storage 16 Other (specify					
		_	4 Abandoned water well		
3 Watertight sewer lines 6 Seepage pit Direction from well?	-	•	5 Oil well/gas well	open field	
FROM TO LITHOLOGIC		OM TO	PLUGGING IN		
0 45 Br Clay			The delivery	ERVILO	
45 57 Rocky Br + Gr C	lau		Programme Andrews	1176	
57 62 Sand + Sm 61	-avel				
62 64 Shale	910111111111111111111111111111111111111			77. 814.4.14.7.4	
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	A STATE OF THE STA		Tank and		
A A A A A A A A A A A A A A A A A A A					
7 CONTRACTOR'S OR LANDOWNER'S CE	RTIFICATION: This w	ater well was (1) co	onstructed, (2) reconstruc	eted, or (3) plugged	
under my jurisdiction and was completed on (mo/day/year) 10 16 9 and this record is true to the best of my knowledge and belief.					
Kansas Water Well Contractor's License No 4			leted on (mo/day/year)	1.1/0.7	
under the business name of ///er Districtions: Use typewriter or ball point pen. PLEAS	Fi'//ing SE PRESS FIRMLY and PRINT	by (signature)	planta underline or circle the	correct answers Send ton	
three copies to Kansas Department of Health and Environment	, Bureau of Water, Geology Se	tion, 1000 SW Jackson	St., Suite 420, Topeka, Kansa	is 66612 1267. Telephone	
785-296-5522. Send one to WATER WELL OWNE					