	N OF WA	TER WELL:	Fraction		RECORD F	Form WWC-	5 KSA 82 ction Number		ip Number	Range N	umber
ounty: P	ratt		NW	1/4 NW	1/4 SE	1/4	24	T 28	•	R 12	umber EW
stance an	d direction	from nearest to	wn or city stree	t address o	f well if located				<u> </u>	1 11 12	
1/2 W	, 14 N	of Preston									
WATER	WELL OW	NER: Wende	ll Howell								
-	ddress, Bo							Board	of Agriculture,	Division of Water	r Resourc
		: Pres						Applic	ation Number:	T90-0327	
LOCATE	WELL'S L	OCATION WITH	DEPTH OF	COMPLET	ED WELL. 10	32	ft. ELEVA	ATION:			
Γ		N BOX:	Depth(s) Grou WELL'S STAT Pu Est. Yield Bore Hole Dia WELL WATEF 1 Domest 2 Irrigatio Was a chemic	Indwater Err IC WATER Imp test da Imp test	countered 1. LEVEL 35 a: Well water m: Well water .9 in. to . SED AS: 5 Feedlot X 6 Industrial 7	was	elow land su ft. a ft. a ft. a ft., ft., er supply ster supply garden only epartment?	2rface measure after	ft. d on mo/day/y hours p	3	ftgprgpif
			mitted						fected? Yes		
		CASING USED:			ght iron		ete tile	CASING	JOINTS: Glue	ed <b>X</b> Clamp	ed
1 Stee		3 RMP (S	SR)		stos-Cement	9 Other	(specify belo	w)		ded	
X 2 PVC		4 ABS		7 Fiber	•					eaded	
										. in. to	
				in., <b>we</b> ig	jht			ft. Wall thickn	ess or gauge N	No	
YPE OF S	CREEN O	R PERFORATIO	N MATERIAL:			<b>χ</b> 7 P\		10	Asbestos-cem	ent	
1 Steel 3 Stainless steel				5 Fiber	glass	8 RM	8 RMP (SR) 1		Other (specify)		
2 Bras		4 Galvaniz		6 Cond	rete tile	9 AE	S	12	None used (o	pen hole)	
CREEN O	R PERFOR	RATION OPENIN	NGS ARE:		5 Gauzeo	wrapped		8 Saw cut		11 None (ope	n hole)
1 Con	tinuous slo				6 Wire w	rapped		9 Drilled ho	les		
2 Louv	vered shutt	er 4 K	(ey punched	00	7 Torch o			10 Other (sp	ecify)		
CREEN-PE	ERFORATE	ED INTERVALS:	From		ft. to	102	ft., Fro	m	ft.	to	f
										to	
GF	RAVEL PA	CK INTERVALS:	: From	. 'Sn'	ft. to	102	ft., Fro	m	ft.	to	
			From		ft. to		ft., Fro	m	ft.	to	
GROUT I	MATERIAL				nt grout	X3 Bento					
rout Interv	als: From	mU	.ft. to 2U	ft.,	From	ft.	to	ft., From	m	ft. to	
/hat is the	nearest so	urce of possible	contamination:				10 Lives	tock pens	14 /	Abandoned water	well
1 Septic tank 4 Lateral lines				7 Pit privy			11 Fuel storage		15 (	15 Oil well/Gas well	
2 Sewer lines 5 Cess pool			8 Sewage lagoon		on	12 Fertilizer storage		16 (	16 Other (specify below)		
3 Watertight sewer lines 6 Seepage pit				9 Feedyard			13 Insecticide storage		none	<b>.</b>	
rection fro	m well?						How ma	ny feet?			
ROM	TO		LITHOLOGI	C LOG		FROM	то		PLUGGING	INTERVALS	
0	3	Top Soil									
3	82	Clay & S	and				ļ				
82	102	Gravel		7120			ļ				
			7074								
									· · · · · · · · · · · · · · · · · · ·		
									74.		
CONTRA	ACTOR'S (	DR LANDOWNE	R'S CERTIFICA	ATION: This	water well was	s (1)¢onstru	cted, (2) reco	onstructed, or	(3) plugged un	der my jurisdictio	on and wa
npleted o	n (mo/day/	year)8/5/.9	0				and this reco	ord is true to th	e best of my ki	nowledge and be	
mpleted o	n (mo/day/		0				and this reco	ord is true to th	e best of my kr	nowledge and be	lief. Kans

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 sopies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.