	le #54		WATE	R WELL RECORD	Form WWC-5	KSA 82				بقي جانس	سيدن بيد <u>د</u>
1 LOCATION OF WATER WELL:				SE ¼ SE		tion Number	1 26		1	ange Nu 24	_
County: 4	ord od direction	from nearest tou		ddress of well if locate		± 7	T 20	S	R	<u> </u>	<b>-</b> €(W)
			-		u within city?						
			<u>right, <sup>K</sup>a</u> land Indu								
		x # : HyWa		B OT TED			Poord of A	arioultura l	Division	of Mater	Bassurasa
				Kansas 6780	1				DIVISION	oi water	Resources
				OMPLETED WELL							
AN "X"	IN SECTIO	N BOX:									
5 TYPE Of 1 Ste 2 PV Blank casin Casing hei TYPE OF 1 Ste 2 Bra SCREEN O	PERFOR	CASING USED: 3 RMP (S 4 ABS and surface R PERFORATIO 3 Stainless 4 Galvaniz RATION OPENIN	Pump Est. Yield Bore Hole Diame WELL WATER T 1 Domestic 2 Irrigation Was a chemical/I mitted  R) .in. to . 100	4 Industrial bacteriological sample s  5 Wrought iron 6 Asbestos-Cement 7 Fiberglassft., Dia 5 Fiberglass 6 Concrete tile 5 Gauze	r was	tt. ift. ift. ift. ift. ift. ift. ift. i	after	hours pu hours pu hours pu 11 12 L; If yes d? Yes Weld Threa or gauge N pestos-ceme er (specify) ne used (op	mping .  nping .  to .  Injection Other (\$  mo/day  d .  d .  aded .  in. to .  o. SDE ent .  men hole	well Specify be //yr samp No : Clampe	gpm gpm ft. elow)
									11 NO	ne (open	noie)
	uvered shut			wrapped		9 Drilled holes 10 Other (specify	۸				
		ED INTERVALS:	• •	7 Torch		4 E.					
G	GRAVEL PA	CK INTERVALS:	From13 From		130	ft., Fro ft., Fro ft., Fro	om	ft. t	o o o		ft. ft. ft.
				2 Cement grout			Other				
		_		ft., From	ft.	to	ft., From		ft. to		
		ource of possible				10 Live	14 Abandoned water well				
	ptic tank	4 Later		7 Pit privy		11 Fuel	15 Oil well/Gas well				
2 Sewer lines 5 Cess pool			•	8 Sewage lage	oon	12 Ferti	16 Other (specify below)				
3 Wa	atertight sew	ver lines 6 Seep	page pit	9 Feedyard		13 Inse	none				
Direction for		ı					any feet?				
FROM	TO	Surface	LITHOLOGIC	LOG	FROM	то		LITHOLOG	ilC LOG		
3	35	Brown c			+						
35	62	Caleche									
62	100	1	elay and	rock				· · · · · · · · · · · · · · · · · · ·			
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7 001-	L		DIO OFFICIOATI	Ohl. This	(4)			-1	4		
completed Water Well	on (mo/day	/year)	3 <del>-</del> 25 <del>-</del> 83	ON: This water well w This Water W		and this rec as completed	ord is true to the be	est of my kn	owledge	and beli	ef. Kansas
				SS FIRMLY and PRINT clea	arly. Please fill in	blanks, underli	ne or circle the correct	answers. Ser	nd top wife	e copies t	o Kansas

Department of Health and Environment, Bureau of Water Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.