1			R WELL RECORD	Form WWC				
LOCATION OF W	,	Fraction	CE . C		ection Number	Township Nun		Range Number
County: For	····		ddress of well if locate	= 1/4	27	T 26	S	R 25 EM
	A .	•		آد جد	V.	Mw#	19	
	DWNER: 121NA		led Dodgi	ECITY	/ //	791W #		<u> </u>
	Box # : Po Be		MICOLI			Decod of Am	dan kama - F	Minister of Makes Decem
			11221					Pivision of Water Resour
City, State, ZIP Cod	S CONTION WITH	Las Tx 7	322/	r.		Application I		
AN "X" IN SECT								
1 ;	1 1 1							
NW -	NE	•					•	mping
!								mping g
w -								to
: ;		VELL WATER I 1 Domestic				8 Air conditioning		njection well
SW -	SE					4 .		Other (Specify below)
1 !	! ^ ,	2 Irrigation						mo/day/yr sample was s
<u> </u>		was a chemical/t mitted	bacteriological sample s	Submitted to		ter Well Disinfected		No
TYPE OF BLANK	K CASING USED:	inted	5 Wrought iron	8 Cond	rete tile			Clamped
1 Steel	3 RMP (SR	1	6 Asbestos-Cement		r (specify belov			ed
7≱√PVC	4 ABS	,	7 Fiberglass			···		ded
		n to 35						n. to
)
	OR PERFORATION		, g	₹P			stos-ceme	
1 Steel	3 Stainless		5 Fiberglass		MP (SR)			
2 Brass	4 Galvanize	d steel	6 Concrete tile	9 A	• •		used (ope	
CREEN OR PERF	ORATION OPENING	SS ARE:	5 Gauz	ed wrapped		8 Saw cut	` .	11 None (open hole)
1 Continuous	slot X Mill	l slot	6 Wire	wrapped		9 Drilled holes		
2 Louvered sh	•		7 Torch	cut		10 Other (specify)		
CREEN-PERFORA	ATED INTERVALS:	From.	<mark>Ф</mark> ft. to	3 5%	ft., Fro	m	ft. to)
		From	ft. to		ft., Fro	m	ft. to)
GRAVEL I	PACK INTERVALS:	ت From	₹ ft. to	. ک .کـ	ft., Fro	m	ft. to)
		From	ft. to		ft., Fro	m	ft. to)
GROUT MATER			∠ Cement grout					
			ft., From	ft.				. ft. to
	source of possible of		- n:			tock pens		pandoned water well
•	1 Septic tank 4 Lateral lines		7 Pit privy		11 Fuel storage		15 Oil well/Gas well 16 Other (specify below)	
2 Sewer lines	,		8 Sewage lage	oon		izer storage	16 U	ner (specify below)
vvatertight s Direction from well?	sewer lines 6 Seepa N/W	ige pit	9 Feedyard			ticide storage		
FROM TO	77/**	LITHOLOGIC	LOG	FROM	How ma		GGING IN	ITERVALS
0 20	Bed Oli	stic Clair		111011	 '			
20 35	Bed Son	al. Clar	,					
35 40	By tak	UF'NS/	osty Clay					
40 50	FLUE T	OMIEDI						
	Satu	at = d a	+ 40'					
		7//						
		THE PARTY OF THE P						
		-						
				-				
CONTRACTOR'S	S OR LANDOWNER	S CERTIFICATI	ON: This water well w	as (NY consti	ructed (2) reco	onstructed, or (3) plu	aged und	er my jurisdiction and v
ompleted on (mo/d	lay/year) / 2	8 95						wledge and belief. Kan
	tor's License No.		This Water W					
			1 Montal Si		by (signa			
			•			- 10h 21	top three	opies to Kansas Department
			0-0001. Telephone: 913-296-5					so to transact population