WATER WELL RECORD	Form WWC	C-5	Division of Water Resources; App. No.			
1 LOCATION OF WATER WELL: County:	Fraction SE'4 NE	IE1/4	Section Number	Township Number T 27S	Range Number R E/W	
Distance and direction from nearest t	own or city street address of v	vell if C	Global Positioning	Systems (decimal degr		
			Latitude:	,	,	
Langit				ngitude:		
2 WATER WELL OWNER: Kenneth Glenn			Elevation:			
RR#, St. Address, Box # :	007	78 35	Datum:			
City, State, ZIP Code :	R Zunningham	VS		Method:		
3 LOCATE WELL'S 4 DEPTH C	OF COMPLETED WELL !	10	2 f	victiou.		
WITH AN "X" IN Depth(s) Gro	undwater Encountered (1)	30	ft (2)	ft (3)	ft	
SECTION BOX: WELL'S ST.	Depth(s) Groundwater Encountered (1)					
N Pum	Pump test data: Well water wasft. after hours pumping					
Est. Yield						
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)						
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well						
Was a chemical/bacteriological sample submitted to Department? Yes						
Sample was submitted						
S					•	
5 TYPE OF CASING USED: 5	Wrought Iron 8 Cor	crete tile	CASINO	G JOINTS: Glued	Clamped	
	Asbestos-Cement 9 Other	er (specify	below)	Welded		
	Fiberglass	or (specify		Threaded		
Blank casing diameter						
TYPE OF SCREEN OR PERFORATION						
1 Steel 3 Stainless Steel	5 Fiberglass 7 PVC	9 A	BS	11 Other (Specify)		
2 Brass 4 Galvanized Steal	6 Concrete tile 8 RM (S	R) 10 A	sbestos-Cement			
SCREEN OR PERFORATION OPENINGS ARE:						
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)						
2 Louvered shutter 4 Key punched 6 Wire wapped 8 Saw cut 10 Other (specify)						
SCREEN-PERFORATED INTERVALS: From						
From						
GRAVEL PACK INTERVALS: From						
					ft.	
6 GROUT MATERIAL: 1 Neat cer	ment 2 Cement grout 3 B	entonite	4 Other	ole Plus		
Grout Intervals: From	ft. to 23 ft., From	ciitoiiite	ft to fi	From	ft. toft.	
What is the nearest source of possible co		• • • • • • • • • • • • •		, 1 10111	11. 10	
-	ral lines 7 Pit privy	10 Livesto	ck nens 13 Ins	ecticide storage	16 Other (specify	
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below)						
	page pit 9 Feedyard	12 Fertiliz				
Direction from well? No. No.	Within		feet? 10.00			
	OLOGIC LOG	FROM	TO	PLUGGING INT	ERVALS	
0 2 500						
9 5 Red 1	2/4					
3 7 Sand	7.					
7 15 Kel C	lau .					
15 18 Light Br	rain Class					
18 21 Olight	Collored Offices	3_/				
22 27 Sand						
27 29 Light Rr	From Caldy					
29 35 Ofine	Sand					
35 12 Sand	- wrong					
7 CONTRACTOR'S OR LANDOWN	VER'S CERTIFICATION:	This water	well was (1) constr	ucted. (2) reconstruct	ed. or (3) plugged	
under my jurisdiction and was complete	ed on (mo/day(year) 5-2	1-09and	this record is true	the best of my know	vledge and belief	
under my jurisdiction and was completed on (mo/day/year)						
under the business name of Lyman's Inc. by (signature)						
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the chreet 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						
785-296-5522. Send one to WATER W. http://www.kdheks.gov/waterwell/index.html.	ELL OWNER and retain one	ioi your re	Loius. Fee of \$5.	oo ior each <u>constructed</u>	ı wen. Visit us at	