WATE	R WELI	RECORD	Form V	WWC-5	Divisi	on of Wate	er Resources; App. No.			
I LOCATION OF WATER WELL:			Fraction SE v4 SE v4 SE v4			Township Number				
	ity: Kiowa				Clabal Par	-1411	T 27 S	R 19 E/W	2	
Distance and direction from nearest town or city street address of well if located within city?					Global Positioning Systems (decimal degrees, min. of 4 digits)  Latitude:					
5 miles north, 3 miles west of Greensburg, KS					Longitude:					
2 WATER WELL OWNER: Mike Terryn					Elevation:					
RR#, St. Address, Box # 20075 KC Ave. 25					Datum:					
City, State, ZIP Code Greensburg, KS 67054					Data Collection Method:					
3 LOCATE WELL'S   4 DEPTH OF COMPLETED WELL 120						ft.				
	CATION	INI Danth (a) C	nove devetor Encovetor	-d (1)	Δ.	(2)	6 (2)	^		
WITH AN "X" IN SECTION BOX:  Depth(s) Groundwater Encountered (1) ft. (2) ft. (3) ft. WELL'S STATIC WATER LEVEL 93 ft. below land surface measured on mo/day/yr 7-5-07										
	N	Pun	np test data: Well water	was	ft. after		hours pumping	gpm		
		☐ Est. Yield	gpm: Well water	was	ft. after		hours pumping	gpm		
WELL WATER TO BE USED AS: 5 Public water supply  By Air conditioning 11 Injection well  Character of the conditioning 11 Injection well  Domestic 3 Feedlot 6 Oil field water supply  2 Irrigation 4 Industrial 7 Domestic (Igwn& garden)  WELL WATER TO BE USED AS: 5 Public water supply  9 Dewatering  10 Monitoring well										
w L		E Comestic	2 3 Feedlot 6 C	oil field water s	upply	9 Dew	vatering 12 C	ther (Specify below)	)	
		2 Irrigation	4 Industrial / D	omestic (izwna	garden)	10 Mor	litoring well			
SW  SE   Was a chemical/bacteriological sample submitted to Department'? Yes No X If yes, mo/day/yrs										
Was a chemical/bacteriological sample submitted to Department'? Yes No X If yes, mo/day/yrs Sample was submitted Water well disinfected? Yes X No										
	S									
5 TYPE	E OF CAS	ING USED: 5	Wrought Iron	8 Concrete tile		CASIN	G JOINTS: Glued	Clamped		
I I	Steel	3 RMP (SR) 6	Asbestos-Cement	9 Other (specif	y below)		Welded	. <b>x</b>		
I Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specifically Seeding of the property of the prop					in to		Threade	d.^		
Casing	asing diam beight abov	ve land surface 18"	in Weigh	ter,t	lhs /ft V	Vall thick	kness or guage No	SCH160		
11111	T OCKLL	A OK I DKI OKATI	OIT WITT DICITIE.							
I	Steel	3 Stainless Steel	5 Fiberglass al 6 Concrete tile 8	PVC 9	ABS		1 1 Other (Specify)			
				RM (SR) 10	Asbestos-	Cement	12 None used (ope	n hole)		
		FORATION OPEN	INGS ARE: 5 Guazed wrappe	d 7 Tarah a	st O Deilla	d balas	I I None (ones l	ala)		
1 2	Louvered	shutter 4 Key nun	ched 6 Wire wrappe	u / Torch ci	t 10 Othe	a noies r (specif	i i None (open i	101e)		
SCREE	N-PERFO	RATED INTERVAL	ched 6 Wire wrapped LS: From 120	ft. to 80	ft	From	ft. to	ft.		
			From LS: From 120	ft. to	ft.	, From	ft. to	ft.		
	GRAVEL	PACK INTERVA	LS: From 120	ft. to	ft.	, From	ft. to	ft.		
			From	ft. to	ft.	, From	ft. to	ft.		
6 GRO	UT MATI	RIAL: I Neat o	ement 2 Cement grou	3 Bentonite	4 Other					
	ntervals:	From 78					ft., From	ft. to ft.		
What is	the nearest	source of possible of	contamination:					)m		
1	Septic tank		eral lines 7 Pit privy		stock pens		secticide Storage	Other (specify		
2	Sewer line	s 5 Ces	s pool 8 Sewage lag				bandoned water well	below) Open field		
Direction	watertigh n from wel	12 Immediate vicin	page pit 9 Feedyard	How ma	nv feet? In	nmediate	l well/gas well vicinity			
FROM	TO	LIT	HOLOGIC LOG	FRO			PLUGGING IN	TERVALS	_	
0	10	Silt		120	78	10/20 S				
10	50	Clay		78	0	3/8 Ben	tonite chips			
50	120	Gravel								
						ļ				
						<del> </del>				
									_	
1										
7 CON	TRACTOR	'S OR LANDOWN	ER'S CERTIFICATION ed on (mo/day/year)	1: This water w	ell was (1)	onstru	cted, (2) reconstruct	ed, or (3) plugged		
under m	y jurisdicti	on and was complet	ed on (mo/day/year) ./ se No 665 Thi	s Water Wall D	d this reco	rd is true	to the best of my known on (more ay/year).	wledge and belief.		
Kansas under #h	water Wel	l Contractor's Licen- name of Pratt Wel	se No. Thi		by (signatu		July :	ر حر مح	/	
INSTRU	CTIONS: Us	e typewriter or ball poin	it pen. <u>PLEASE PRESS FIRM</u> d Environment, Bureau of Wat	LY and PRINT cle	arly. Please f	ill in blank	s, inderline or circle the	correct answers. Send to	p	
three con	iec to Kansas	Department of Health and	1 F	Caalaan Caatian	1 000 011/ 1	I C4 4	Fuita 120 Tanaka Vanca		ρ	
705 20	6-5522 Sa	nd one to WATED	WELL OWNER and ret	er, Geology Section	r records	ackson Star Fee of \$5	5.00 for each constru	cted well. Visit us a	it	