	WELL RECORD	Form WWC-5	KSA 82a-	1212 ID No.		
	action SE 14 NE	14 SE 14	Sed	tion Number	Township Number T 25 s	Range Number
Distance and direction from nearest town or	city street address	of well if located w	712		1 48 5	H /C) E/W
	r Main		tion			Division of Water Resources
3 LOCATE WELL'S LOCATION WITH 4 DE	S 6712	TED WELL	20	# ELEV/ATI	Application Number:	
AN "X" IN SECTION BOX: Dep	th(s) Groundwater I .L'S STATIC WATE	Encountered 1 R LEVEL 1.5	94 ft. beld	ft. 2 ow land surface	2 ft. measured on mo/day/vr	3ft.
Est.	Pump test of	lata: Well water	was	ft. aft	ter hours	pumpinggpm pumpinggpm
WEL	L WATER TO BE U Domestic 3 F	JSED AS: 5 Pt eedlot 6 O	ublic water s il field water	supply 8 supply 9	3 Air conditioning 11 2 Dewatering 12	njection well Other (Specify below)
SW SE - Was	a chemical/bacteri d			Department? Ye		mo/day/yrs sample was sub-
TYPE OF BLANK CASING USED: 3 RMP (SR)	6 Asbe	ught iron estos-Cement		(specify below)		edClampedded
(2)PVC 4 ABS Blank casing diameter	7 Fibe in. to	rglass ft., Dia		in. to	Thro	eaded
Casing height above land surface	4.d. in.,	weight		lb	s./ft. Wall thickness or gua	ge No. <i>SOI 40</i>
1 Steel 3 Stainless Steel 2 Brass 4 Galvanized Steel		rglass crete tile	7 PVC 8 RMP (SR) 9 ABS		` •	y)
SCREEN OR PERFORATION OPENINGS A	RE:	5 Guazeo	d wrapped	3	12 None used (o 8 Saw cut	11 None (open hole)
1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key pur		6 Wire w 7 Torch o		-	9 Drilled holes 10 Other (specify)	ft.
SCREEN-PERFORATED INTERVALS: Fr	om 10	ft. to	20	ft., From	ft. te	oft.
Fr GRAVEL PACK INTERVALS: Fr	om om	ft. to ft. to	20	ft., From ft., From	ft. to	oft.
Fr	om	ft. to		ft., From	ft. to)ft.
GROUT MATERIAL: 1 Neat ceme Grout Intervals: From	ent d 2 Ce	ment grout	3 Bent	onite 4	Other	
What is the nearest source of possible conta	mination:	, From	II. 10	o 10 Livestod		ft. toft. Abandoned water well
1 Septic tank 4 Lateral line		7 Pit privy		11 Fuel sto	'	Oil well/Gas well
2 Sewer lines 5 Cess pool		8 Sewage lago		12 Fertilize	_ · ·	Other (specify below)
3 Watertight sewer lines 6 Seepage p Direction from well?	it	9 Feedyard		13 Insectici	ide storage	lust 5 ite
	HOLOGIC LOG		FROM	то	PLUGGING II	ITERVALS
0 10 May, 51	ty, dry					
	740					
					19 Q-L	
				100		
CONTRACTOR'S OR LANDOWNER'S C	ERTIFICATION: Th	is water well was	((1)) constru	cted, (2) recons	structed, or (3) plugged un	der my jurisdiction and was
vater Well Contractor's Licence No5	<i>}</i>	This Water W	all Record	and this recor	rd is true to the best of my k	nowledge and belief. Kansas
under the business name of Oranico	Great P	ains In	<u>C</u> .		nature) Donous	EDHUNN

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send to 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 WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.