				WA <sup>-</sup>	TER WEL	L RECOF	RD Form	n WWC-					
	ON OF WAT Pratt	ER WELL:	F	raction SE	1/4 SE		CTF.	Se	ction Number	Township		Range R 15W	Number
County:		from nearest	town or o		74	74		1/4 20		T 20	S	R ±/"	E/W
		f Cullis			audress	or well it	located wi	THE CITY?					
•		NER: B. C	-		Re	d Tipe	r Dril	ling					
2 WATER	WELL OW	NEH: De G	land. F						ak Bldg.	Decord o	. A musica alba ama	District of Mar	D
RR#, St. Address, Box # : Haviland, Kansas City, State, ZIP Code : 67059					ᅜ	Wichita, Kansas 67202				Board of Agriculture, Division of Water Resources Application Number: T82-181			
					MТ	CILLUA	215	5 0/2	202	Applicat	on Number:		
J LOCATE	: WELL'S L IN SECTIOI	OCATION W N BOX:	TH 4 DE	PTH OF	COMPLE	ETED WE	LL 주보기		ft. ELEVA	TION: Unkno	Mii		
		1	Depth	(s) Grou	ndwater E	Encounter	ed 1 <del>.</del>	100	ft. :	2	ft. 3	3	.,
Ī	! !	1	WELL							face measured			
_	- NW	NF								fter			
	1	1								fter			
<sub>≝</sub> w ⊢	1	ı	Bore l	Hole Dia	meter	ģ				and			
ŧ w ├	!	ŀ	WELL	. WATEF	TO BE	USED AS	: 5 P	ublic wat	er supply	8 Air conditioni	ng 11	Injection well	
īL	_ sw	SE	1	Domest	ic 3	3 Feedlot	6 <u>O</u>	il field wa	ater supply	9 Dewatering	12	Other (Specify	y below)
	- 311	1	2	Irrigatio	n 4	4 Industria	al 7 La	awn and	garden only	10 Observation	well ,		
l L	i	ΙX	Was a	a chemic	al/bacterio	ological sa	mple subm	nitted to D	epartment? Y	es <u>No</u> .	; If yes	, mo/day/yr sa	mple was sub
			mitted						Wa	ter Well Disinfe	ted? Yes	No	
TYPE C	F BLANK	ASING USE	D:		5 Wro	ought iron	1	8 Conci	ete tile	CASING J	OINTS: Glue	d Clar	nped
1 Ste	el	3 RMF	(SR)		6 Ast	estos-Ce	ment	9 Other	(specify below	v)	Weld	ed	
2 <u>PV</u>	<u>C_</u>	4 ABS			7 Fib	erglass					Threa	aded	
Blank casir	ng diameter	<b>XXX</b> 5	in. to	195	'	ft., Dia		in. to		ft., Dia		in. to	ft.
Casing hei	ght above la	ind surface.		12	2in., we	eight	2.8	<i>.</i> .	Ibs./	ft. Wall thicknes	s or gauge N	o. Sch.	40
_	_	R PERFORA				•		7 <u>.P\</u>			sbestos-ceme		
	1 Steel 3 Stainless steel					5 Fiberglass			8 RMP (SR)		ther (specify)		
2 Bra	-		anized stee			ncrete tile		9 AE			lone used (or		
					0 00.		Gauzed w			8 Saw cut	٠.	11 None (or	oen bole)
SCREEN OR PERFORATION OPENINGS ARE:  1 Continuous slot 3 Mill slot							Wire wrap	• •		9 Drilled hole		(0)	3011 11010,
	vered shut		4 Key pund	ched			Torch cut	•		10 Other (spec			
		D INTERVA	IS. Fro	om	19				ft Fro	m	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	n	ft
SUNCEIN-F	CHICHAI	U INTERVA								m			
	DAVEL DA	CK INTERVA								m			
	INAVEL FA	OK INTERVA		om	<del>_</del>					m			ft.
GPOLIT	MATERIAL	· 1 Na	eat cement		2 Cem					Other			
										ft., From			
		urce of poss				., 110111		11.		tock pens		bandoned wa	
		4 L				7 Pit pri	· ·			storage		Dil well/Gas wa	
1 Septic tank 4 Lateral lines 2 Sewer lines 5 Cess pool						7 Pit privy 8 Sewage lagoon			12 Fertilizer storage 16 Other (specify below				
3 Watertight sewer lines 6 Seepage pit						9 Feedyard				•	ticide storage		
	•	er lines o s Sou				9 Feedy	aru			ny feet?60			
Direction for FROM	TO	Sou		HOLOGI	CLOG			FROM	TO How ma	ny teet?OU	LITHOLOG	IC LOG	
0	80	Clay		HOLOGI	O LOG			111011	<del>  '`</del>		LITTIOLOC	iio Eou	
80	215	Sand an	dCmorro	1					1				
- 00	217	Sanu an	ugrave.	<u> </u>									
							+		+				
									-				
									<del> </del>				
									<del>                                     </del>				
									1				
7 CONTE	RACTOR'S	OR LANDOW	NER'S CE	RTIFICA	ATION: TH	nis water	well was (	1) constr	ucted. (2) reco	onstructed, or (3	) plugged und	der my jurisdic	tion and was
COmpleted	on (mo/day	year)		3/18/	/82					ord is true to the			
Water Wal	Contractor	s License No		186						on (mo/day/yr)	-	4/29/	
	business na			Kells			l Serv		•	ture)		7, 20,7/	_
INSTRUC	Cuaii igaa i id	110 01				11			UY (SIMIIA				
	TIONS: Use	typewriter or	ball point n						rly. Please fill i	n blanks, underl	ne or circle th	e correct answ	ers. Send ton
three copie	s to Kansas		of Health an	en, <i>PLE</i>	ASE PRE	SS FIRM	ILY and PF	INT clea	rly. Please fill i	n blanks, underli gy Section, Tope	ne or circle th		