			ATER WELL REC	ORD Form WWC-5	KSA 82a	-1212 ID No)			
	TION OF WAT		Fraction	1 11-	Se	ection Number	Township Numbe	1	Number	
	مديره زيح				1/4	22	T 28	S R Z	O EN	
1 m.	le No	From nearest too Multi- NER: Paul	wille	address of well if located	within city?					
RR#, St. A City, State,	ddress, Box a	# : Box !!	oz miho Ks	67109			Application Num			
3 LOCATE	WELL'S LO	CATION WITH	4 DEPTH OF C	COMPLETED WELL	100	ft. ELEVAT	TION:			
AN "X" II	N SECTION I	BOX:		ndwater Encountered						
- w-	WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yrft. after								gpm gpm below)	
_	-SW	- SE	Was a chemica mitted	cal/bacteriological sample submitted to Department? Yes No						
5 TYPE	OF BLANK C	ASING USED:	L	5 Wrought iron	8 Concr	rete tile	CASING JOINTS:	Glued Clarr	nned	
1 Steel 3 RMP (SR P PVC 4 ABS				J		(specify below))	Welded		
Blank casi	na diameter		in to	ft., Dia						
				in., weight						
		R PERFORATIO		, .	⊘ P\			10 Asbestos-Cement		
1 Steel 3 Stainless 2 Brass 4 Galvanize				3		MP (SR) BS	11 Other (Specify)			
							8 Saw cut	11 None (op	en hole)	
1 Continuous slot 2 Louvered shutter 1 Continuous slot 4 Key punched				6 Wire wrapped 7 Torch cut						
İ		D INTERVALS		6.0		ft From				
			From	ft. to		ft From .		. ft. to	ft.	
· '	GRAVEL PAG	CK INTERVALS	5: From	2.0 ft. to ft. to	/#0	ft., From		. ft. to	ft.	
			F10111	It. 10		IL, FIOIII .		. II. 10		
	JT MATERIA		at cement	2 Cement grout			Other			
				2.0 ft., From	ft.			_		
What is the nearest source of possible				7.50		10 Livesto		Abandoned wat		
1 Septic tank 4 Late				7 Pit privy				15 Oil well/Gas well		
2 Sewer lines 5 Cess 3 Watertight sewer lines 6 Seep			•	8 Sewage li		goon 12 Fertilizer storaç 13 Insecticide stora		16 Other (specify below)		
l	rom well?	illes o Seel	page pit	pit 9 Feedyard			y feet? /600			
FROM	TO		LITHOLOGIC	LOG	FROM	TO		NG INTERVALS		
0	10	sad								
10	30	Saul	braum	-la				· · · · · · · · · · · · · · · · · · ·		
30	85	Sadt		114						
45	/80	white	clay resit	Aruse					· · · · · · · · · · · · · · · · · · ·	
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									7.7	
7 2017	1									
CONTR	ACTOR'S O	R LANDOWNE	R'S CERTIFICAT	TION: This water well wa	is Constr	ructed, (2) recor	nstructed, or (3) plugge	d under my jurisdic	tion and was	
				This Water					belief. Kansas	
	usiness nam		La 1 182 01	n'll' l'	well necord		signature)	1 2 +1		
INSTRUCT	TIONS: Use type	writer or ball point pe	en. <u>PLEASE PRESS F</u>	IRMLY and PRINT clearly. Please	fill in blanks, un	nderline or circle the o	correct answers. Send top three	copies to Kansas Departr	ment of Health	
and Enviro	onment, Bureau o	f Water, Geology Se ach <u>constructed</u> well.	ection, 1000 SW Jackso	on St., Suite 420, Topeka, Kansas	66612-1367. Te	elephone 785-296-55	22. Send one to WATER WELL	OWNER and retain one for	or your	