mw-1	G	JNO. 201	1060 WATE	ER WELL RECOR	D Form	MWC-5 KSA	82a-12	12				
1 LOCATI	ON OF WA	TER WELL:	Fraction	111.1	.1.	Section Nun	nber	Township Nur	mber	Ran	ge Numb	per _
			-1 $N(N)$		NW 1/2			т <i>28</i>	S	R	7_	E(W)
Distance a		1 1	1.4.	address of well if I	ocated within	city?					•	
	-2	57 W	est Ci	Kingr	nan							
2 WATE	R WELL OV	NER: E	d Brun	ner								
RR#, St.	Address, Bo		57 WCS1					Board of Ag	riculture.	Division of	Water R	lesources
	, ZIP Code	:	Kinama	1/-	670	168		Application				
		OCATION WITH		COMPLETED WEI	1 14	0 # 51	EVATIO					
AN "X"	IN SECTIO	N BOX:	Donth(s) Groun	dwater Encountered	ر ر	7	EVAIIO	N	4 7			4
- 17	/ 	` . 	Depth(s) Groun	C MATER LEVEL	1-41	4 b -l	، ال. ك ما من ملام		IL. 3	//	2/97	· · · · · · · ·
t Y	` ;	;	WELLS STATE	C WATER LEVEL	. 60. 1.60	π. below lan	o surrace	e measured on I	mo/day/yr		o. ! . ! .~	·
·	NW	NE		np test data: Wel								
1	ļ		1	gpm: Wel								
.≝ w ⊢	!	E	Bore Hole Dian	neter 🕰 i	n. t o	<i>.</i>	.ft., and		in	. to	· · · · · •	ft.
ž " [!	! -	WELL WATER	TO BE USED AS:	5 Publ	ic water supply	8 A	Air conditioning	11	Injection v	vell	
īL	SW	%	1 Domestic	3 Feedlot		ield water suppl		Dewatering	_	Other (Sp	ecify bek	ow)
	1	3;	2 Irrigation	4 Industria	1 7 Law	n and garden o	nly 10	Monitoring well				
1 1	i	1 1	Was a chemical	l/bacteriological sar	nple submitte	ed to Departmer	nt? Yes	No.X	; If yes	mo/day/y	sample	was sub-
<u> </u>		5	mitted				Water	Well Disinfected	? Yes	1	No X	
5 TYPE (OF BLANK (CASING USED:		5 Wrought iron	8	Concrete tile		CASING JOIN	ITS: Glue	<u> </u>	Clamped	
 1 St	eel	3 RMP (S	SR)	6 Asbestos-Cer	ment 9	Other (specify	below)		Weld	ed		
Cn2 P1		4 ABS	,	7 Fiberglass		· · · · · · · · · · · · · · · ·	•			aded F	. 1	
			in to	ft., Dia				 .ft., Dia			_	ft
	•	and surface	— /	in., weight				Vall thickness or				n.
•	•	R PERFORATIO		in., weight		/	ibs./it. v					
				5 Fibereless	,	7 PVC			stos-ceme			
1 St		3 Stainles		5 Fiberglass		8 RMP (SR)			, ,			
2 Br		4 Galvani		6 Concrete tile		9 ABS			used (op	•		
		RATION OPENIN			Gauzed wrap	•		Saw cut		11 None	(open h	iole)
	ontinuous sid		Mill slot	6	Wire wrappe	d	_	Drilled holes				
2 Lo	uvered shut	ter 4 K	Key punched		Torch cut	1/0	10	Other (specify)				
SCREEN-	PERFORAT	ED INTERVALS:	: From	4.0 ft.	to	7,.O ft.	, From .		ft. t	0		ft.
			From	ft.								
(GRAVEL PA	CK INTERVALS	: From	3. <i>(</i>) ft.	to	<i>f. O</i> ft.	, From .		ft. t	0		ft.
			From	ft.	to		, From		ft. t			ft.
6 GROUT	T MATERIAL	.:1 Neat	cement	2 Cement grout	(3	Bentonite)	4 Oth	er				
Grout Inte	rvals: Fro	m 3 O	.ft. to /C) ft., From .		ft. to		ft., From		ft. to .		ft.
What is th	e nearest so	ource of possible	contamination:			10 1	Livestock	pens	14 A	bandoned	water w	ell
1 Se	eptic tank	4 Late	eral lines	7 Pit priv	v	<11 I	Fuel stor	age	15 C	il well/Gas	well	
	wer lines	5 Cess	s pool	8 Sewag			Fertilizer			ther (spec		<i>(</i>)
		er lines 6 Seep	•	9 Feedya	-			e storage		(,	,
	from well?	_ '	. • .	o i cody			v many f					
FROM	TO	on to	LITHOLOGIC	LOG	FF	ROM TO	V IIIally I		JGGING I	NTERVAL	S	
00	5.0	Sand.		e to med.		`						
	0.0	0.0		72.0	13,44	}	+					
\sim	9.0	poorly	1 10	1 1901 1	419							
5.0	7.0	Suru,		ry tige to	Canlad		-					
<u></u>		1		oderately	Solded							
0 -	1/10		mo13+									
9.0	14.0	Sand,		ry fine of	0 thine							
	i	grain,	well sor	Hed, wet								
	L.,	,										
			100	1						.		
		Lush	Moun	+ waive	r aro	intecl	on	12-	10-0	12		
					<i>.</i>].	i		10				
		for t	Ed Bru	mer Pli	im bir	K EE	100	ric KV	HEA	o. 02	049	Z 792
		10,				1						
		by	1)000	Taylor		•						
		<u> </u>										
7 00:	1		DIO OFFICIAL	TION THE								
7 CONTE	HACTOR'S	OH LANDOWNE	H'S CENTIFICAT	TION: This water w	veil was (1)	constructed, (2)	reconstr	ucted, or (3) plu	ugged und	er my juri	sdiction	and was
completed	on (mo/day	year)	.0.6			and this	record is	situe to the bes	LOLINY KI	owledge a	nd belief.	. Kansas
Water Wel	I Contractor	s License No.	53 <i>I</i> .	This Wa	ter Well Red	ord was comple	eted on (mo/day/yr)	'.1. 7.1	(1.2 · ·		
under the	business na	me of 🥱	2			by (s	signature	(Illia	en \	Tur	~	
INSTRU	JCTIONS: Use t	pewriter or ball point	t pen. PLEASE PRESS	FIRMLY and PRINT cle 620-0001. Telephone: 91	arly. Please fill in	blanks, underline o	or circle the	correct answers. Se	nd top three	copies to Ka	nsas Depa	rtment