	WA ⁻	TER WELL RECORD	Form WWC-5	KSA 82a-	1212	
LOCATION OF WATE				tion Number	Township Number	Range Number
	Kiewa ne	14 NO 14 NO		18	т 29 s	R18 <u>E</u> @
stance and direction in						` i
WATER WELL OWN		f Greensberg,	Va.			
R# St Address Box a	" MATATH VACUI		~		Board of Agricultu	ure, Division of Water Resources
itv. State. ZIP Code	503 South Bay	Greensberg, K	67	A5~1	Application Numb	
			200	ft FLEVAT		***************************************
AN "X" IN SECTION I	BOX: Depth(s) Grou	ndwater Encountered 1.	200	ft. 2		ft. 3
T T						y/yr
1	- I Pu		_			s pumping gpm
NW -						s pumping gpm
w	Bore Hole Dia	meter9in. to.			and	in. toft.
" [!	WELL WATER		5 Public water		8 Air conditioning	11 Injection well
sw	- SE 1 Domest		-			12 Other (Specify below)
1	2 Irrigatio			=		
<u> </u>		al/bacteriological sample su	ubmitted to D	•		yes, mo/day/yr sample was sub-
TYPE OF BLANK CA	mitted	E Manualtinan			er Well Disinfected? Ye	
1 Steel	3 RMP (SR)	5 Wrought iron 6 Asbestos-Cement	8 Concre	ste tile (specify below		Slued Clamped
PVC	4 ABS			•	•	Threaded
	_					in. to ft.
						ge No
	PERFORATION MATERIAL:	3	37 PV		10 Asbestos-	1
1 Steel	3 Stainless steel	5 Fiberglass	8 RM	IP (SR)	11 Other (spe	cify)
2 Brass	4 Galvanized steel	6 Concrete tile	9 AB	S	12 None used	1
CREEN OR PERFORA	TION OPENINGS ARE:	5 Gauze	d wrapped		8 Saw cut	11 None (open hole)
1 Continuous slot	3 Mill slot	6 Wire w	rapped		9 Drilled holes	
2 Louvered shutter	• •	7 Torch			` ' ' '	
CREEN-PERFORATED						ft. toft.
ODAVEL BACK						ft. toft.
GHAVEL PACK	(INTERVALS: From	. 20	200	π., Fron ft Fron	n	ft. toft.
GROUT MATERIAL:	From 5xNeat cement	ft. to 2 Cement grout	2 Ronto		·	ft. to ft.
						ft. toft.
	ce of possible contamination:			10 Livest		4 Abandoned water well
	4 Lateral lines	7 Pit privy		11 Fuel s	•	5 Oil well/Gas well
2 Sewer lines	5 Cess pool	8 Sewage lago				6 Other (specify below)
3 Watertight sewer	lines 6 Seepage pit	9 Feedyard		13 Insect	icide storage nen	9
Direction from well?		***		How man		i
FROM TO	LITHOLOGI	C LOG	FROM	то	LITHO	LOGIC LOG
	tep seil					,
3 80	class					
00 120 	gravel					
70 155	clay					
	gravel					
55 200	924103					
				ļ ļ .		
			1			-
			1			
						under my jurisdiction and was
ompleted on (mo/day/ye	ar) 9-288.7			and this recor	d is true to the best of m	y knowledge and belief. Kansas
rater Well Contractor's l	icense No 462	This Water We	Hecord wa			
INSTRUCTIONS: Lise type	of Sam's Water writer or ball point pen. PLEASE PR	NOTE RESS FIRMLY and PRINT clear	ly. Please fill in	by (signate blanks, underline		Send top three copies to Kansas
Department of Health and	Environment, Bureau of Water Prot	ection, Topeka, Kansas 66620	7320, Telepho	ne: 913-862-9360). Send one to WATER WEL	L OWNER and retain one for your
Department of Health and lecords.	Environment, Bureau of Water Prof	ection, Topeka, Kansas 66620-	-7320, Telephol	ie: 913-862-936(o. Send one to WATEH WEL	L OWNER and retain one for your