			ection, 1000 SW Jackso						522. Send one to WATER W		
INSTRUCTION			IGEL WEL en. PLEASE PRESS FI	RMLY and	PRINT clearly. Pleas	se fill in blanks	s, underline or o		signature)	ree copies	s to Kansas Department of Health
	ontractor's	Licence No	738	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				npleted	d on (mo/day/y)	of my ki	nowledge and belief. Kansas
			R'S CERTIFICAT	ΓΙΟΝ: Th							der my jurisdiction and was
						-			,,,		
71		Shale	,								
45	71	Med 84	Nd fixes	ANL	wek						
25	45	Med c	and			1					
0	25	TOO 50	il clay			HOW	10		FLOG	J. 10 IIV	II LITYALU
FROM FROM	m well?		LITHOLOGIC	LOG		FROM		w many		GING IN	ITERVALS
		r lines 6 Seep	age pit		9 Feedya	rd			J	NA	t
2 Sewer lines 5 Cess pool 3 Watertight sewer lines 6 Seepage pit			•	8 Sewage lagoon					•	16 Other (specify below)	
1 Septi			ral lines		7 Pit privy	,			-		
What is the	nearest so	urce of possible									
Grout Interv		_		•							
GROUT	MATERIA	L: 1 Neat	t cement	2 Ce	ment grout	(3)	Bentonite	4	Other		
			From		ft. to	•••••	ft.,	From .		ft. to	ft.
GI	RAVEL PAG	CK INTERVALS:	: From	7/	ft. to	20	ft.,	From .		ft. to	· ft.
SCREEN-PE	ERFORATE	ED INTERVALS:			ft. to	-57	ft.,	From .		ft. to	ft.
	ered shutte	r 4 K	ey punched	RIAL:							
	nuous slot	3M			6 Wire	wrapped			9 Drilled holes		
		ATION OPENIN								(3)	•
1 Steel 2 Brass		3 Stainless 4 Galvaniz									•
	CREEN OF	R PERFORATIO		E 515-	alaaa						
Casing heigh	nt above la	nd surface	d7	in., v	weight	160		1	bs./ft. Wall thickness	or guag	ge No
	diameter	5	in. to	59	ft., Dia		in. to		ft., Dia		ft.
PVC		4 ABS	,	7 Fiber	glass					Thre	aded
TYPE OF 1 Steel	F BLANK C	ASING USED: 3 RMP (SF	3)					helow			
	S						-				
X	1		mitted	Water Well Disinfected? Yes No							
- <b>-</b> ;	sw	- SE	Was a chemical	l/bacterio	logical sample	submitted	to Departm	ent? Y	es No:	lf yes, m	no/day/yrs sample was sub-
			g	,			, 5. 941	,		-	
w	1	E	Domestic 2 Irrigation				ater supply (lawn & gar		<ul><li>9 Dewatering</li><li>0 Monitoring well</li></ul>		Other (Specify below)
	NW   -	- NE	WELL WATER T	TO BE U	SED AS: 5	Public wat	er supply		8 Air conditioning	11 lr	njection well
	NIVA/	- NE	Est. Yield	gp	om: Well wate	er was		ft. a	fter	hours p	umping gpm umping gpm
	- N		WELL'S STATIC	WATER	R LEVEL	<b>(</b> ft.∣	below land	surface	measured on mo/da	ay/yr 🗸	vmping gpm
AN "X" IN			Depth(s) Ground	dwater E	ncountered ,	ئـــ 1	30	ft.	2	ft. 3	8-9-05 tt.
		CATION WITH	4 DEPTH OF CO	OMPLET	ED WELL				ION:		
RR#, St. Ado City, State, Z		# 837	W Kiowa Rie Vieu	V	1.1160	4			Board of Agric Application Nu		Division of Water Resources
		NER: <b>Dere</b>	K ESNILL	en K	ats	•					
trom P	41Mer	KIKS 9	o West ON	(383	to E9	Kd, ga	South	12	mile ON E9	eas	tside of land.
		rom nearest tow	vn or city street ac	ddress of	f well if located	within city	?	1.0			
County:			SW 1/4	SW	14 SW		20		T2-3	S	R 2/ E/W
LOCATIO	ON OF WA	VA VER WELL:	TER WELL RECO	ORD	Form WWC-5		2a-1212 Section Nur	ID No	Township Num	her	Range Number