				WELL RECORD	Form VVVVC-5		-1212 ID No.			
1 LOCATI	ON OF WATE	R WELL:	Fraction	,	Section	on Numbe	r Township Nun	nber Rai	nge Number	
County:	No	orton	NW <sub>2</sub>	5K 1/2 5	5 = 1/4	<u>`</u>	1 T 2	S R	21 EM	
			town or city street add		ted within city?				٦	
4073	102 M	LLEO	urd Addi	tion						
			d Chandler						1	
RR#, St. Ad	dress, Box#	; <b>700</b>	Washington				Board of Agricul	ture, Division of V	Vater Resources	
City, State.	ZIP Code	Alm	ena Ks 67622				Application Num	ber:	1	
LOCATE	WELL'S LO	CATON WI	TH 4 DEPTH OF CO							
3 AN "X" I	N SECTION B	BOX:	DEPTH OF CO	MPLETED WELL	. 73	_ ft. ELE	EVATION:			
	N		Depth(s) Groundw	ater Encountered	1		ft. 2	ft. 3	ft.	
AXE			,				surface measured on			
		. 1	1							
<b> -</b>	NW <b>-</b>	NE					ft. after			
	. i I	· 1	Est. Yield	gpm: Well v	vater was		ft. after	_ hours pumping	gpm	
∯ W			E Bore Hole Diamete	er <b>8</b> in.	to <b>75</b>		ft. and 8 Air conditioning 9 Dewatering	in. to	ft.	
7			WELL WATER TO	BE USED AS:	5 Public water su	pply	8 Air conditionii	ng 11 Injecti	on well	
-	sw <b>-</b>	SE	1 Domestic	3 Feed lot	6 Oil field water s	upply	9 Dewatering	12 Other	(Specify below)	
	i	;	2 Irrigation	4 Industrial	7 Lawn and garde	en (domes	tic) 10 Monitoring v	vell		
<b>†</b> L	1						? Yes No X			
	S			actoriological salli	pio suominiou to D				. 1	
<u>-  </u>			submitted				/ater Well Disinfected		No	
	F BLANK CAS			5 Wrought Iron			CASING JOINT			
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded										
2 PVC 4 ABS 7 Fiberglass Threaded										
Blank casin	ng diameter	4.5	in. to 53	ft Dia	in, to	)	ft., Dia	in. to	ft.	
Blank casing diameter 4.5 in. to 53 ft., Dia in. to ft., Dia in. to ft., Dia in. to ft.  Casing height above land surface 18 in., weight 2.38 lbs./ft. Wall thickness or gauge No248  TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement										
TYPE OF	SUBEEN UD E		ION MATERIAL:	i., weight		DV/C	t. Wall trickliess of go	toe coment		
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)										
			highest steel	6 Concrete tile	0 1	NDE (OK)	11 Other			
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)  SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)										
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 53 ft. to 73 ft. From ft. to ft.										
SCREEN-F	PERFORATEL	INTERVA	LS: From	ft. to		ft.	From	ft. to	t.	
			From	ft. to		ft.	From	ft. to		
GR	RAVEL PACK	INTERVAL	S: From	20 ft. to	73	ft.	From	ft. to	ft.	
,							From			
6 GPOUT	MATERIAL	1 N/c								
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other										
Grout Intervals From 0 ft. to 20 ft. From ft. to ft. From ft. to ft. From ft. to ft. From ft. to ft. What is the nearest source of possible contamination:										
		ce of possi					estock pens	14 Abandoned	water well	
1 Se	eptic tank		4 Lateral lines		privy		el storage	15 Oil well/ Ga	aswell i	
2 Se	ewer lines		5 Cess pool	8 Sev	vage lagoon	12 Fer	tilizer storage	16 Other (spec	cify below)	
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage <b>none</b>									one	
Direction fr	om well?					How man	ny feet?			
FROM	ТО	CODE		GIC LOG	FROM	TO	PLUC	GING INTERVA	LS	
0	2		Surface							
2	15		Clay w/caliche l	enses		T				
15	30		Clay			T				
30	36		Clay			T				
36	45		River mud							
45	52		River mud							
52	60		Fine to med sd	w/clav strks		<b>†</b>				
60	67		Fine to med sd		R	<b> </b>				
67	75		Black shale	viuj idiloc		<b> </b>				
	+ '3-	+	ZINON GIIGIV			<del> </del>				
	1	-				<del> </del>				
						<del> </del>	<del> </del>			
	-	-								
	-	ļ				ļ				
-15	1	<u> </u>				<u> </u>	<u> </u>			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was										
	on (mo/day/yı		12-15	-06			true to the best of my			
Water Wel	I Contractor's	License No		554			Record was completed			
under the I	business name	e of	Woofte	er Pump & W						
INST	RUCTIONS: P	lease fill in b	lanks and circle the corre	ct answers. Send t	hree copies to Kansa	s Departm	ent of Health and Enviro	nment, Bureau of V	Nater, 000 SW	
lacke	On St. Sta 420	Toneka K	nege 88812-1387 Tele	nhone: 913-296-55	45 Send one to WA	TER WELL	LOWNER and retain on	e for your records	v v	