WATER WELL REC	CORD	Form WWC-			er Resources; App. No.		
1 LOCATION OF A County:	TER WELL:	Fraction Sw 3	5W S	Section Number	Township Number	Range Number R E/W	
Distance and direction	ty street address of w	ell if <b>G</b>	l if Global Positioning Systems (decimal degrees, min. of 4				
located within city?	7111		Latitude:				
	sasel, K.	Longitude:					
2 WATER WELL OW	Martin	. 1					
RR#, St. Address, Box	x#: •	13954 NF	HPLX K	tum:			
City, State, ZIP Code : ISabel, KS 7-7065 Data Collection Method:							
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL							
LOCATION							
WITH AN "X" IN	WITH AN "X" IN Depth(s) Groundwater Encountered (1)						
SECTION BOX:							
N	N Pump test data: Well water was ft. after hours pumping gpm  Est. Yield gpm: Well water was ft. after hours pumping gpm						
NW NE							
W E							
SW SE   Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs							
Sample was submitted							
Sample was submitted							
5 TYPE OF CASING U	ICED: 5 Wrought	Iron 8 Cond	rata tila	CACINI	G JOINTS: Glued	Clampad	
1 Steel 3 RM	P(SR) 6 Ashestos	-Cement 9 Othe	r (specify b	velow)	Welded	Ciamped	
Blank casing diameter	5 in. to	ft Diameter	in	. to ft.	. Diameter	in. toft.	
2 PVC 4 ABS 7 Fiberglass Threaded							
Casing height above land surface							
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)							
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE:							
1 Continuous slot 3 Mill slot 5 Guazed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)							
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)							
From ft to ft From ft to ft							
From							
From							
21022							
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
Grout Intervals: From							
What is the nearest source of possible contamination:							
						16 Other (specify	
2 Sewer lines	5 Cess pool	0 0	11 Fuel sto		bandoned water well il well/gas well	below)	
Direction from well?	lines Seepage pit	9 reedyard	12 Fertilize	feet? 5.0.	well/gas well	•••••	
FROM TO	LITHOLOGI		FROM	TO	PLUGGING INT	FRVAIS	
7 <	Say/	C LOG	TROM	10	TECCONTO IIVI	ERVILD	
7 7 2	Sand						
9 15 1	Dhitte Clar	4					
5 37 5	Sand	<del></del>					
	White Class						
	Cine Salid						
49 90 1	Sand						
101 102 4	Fine Shul						
7 CONTRACTOR'S O	R LANDOWNER'S C	ERTIFICATION: T	his water v	well was (1) cons	tructed, (2) reconstruc	ted, or (3) plugged	
under my jurisdiction and was completed on (mo/day/year)							
Kansas Water Well Contractor's License No							
under the business name of by the by (signature) by (signature) by (signature) by (signature) by the fill in blanks, underline or circle he correct answers. Send top							
three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone							
785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at							
http://www.kdhe.state.ks.us/geo/waterwells.							