			ER WELL RECORD			2a-1212		
LOCATION OF V		1	(CF ()		ction Numb	_'.		Range Number
County: Sumne		SE ½		SE 1/4	26	T 31	S	R 1 BW
	oad, Wellington	•	t address of well if loc	ated within city	/'?			
2 WATER WELL	OWNER: IKON	Office Solutions	-					
RR#, St. Address,			way			Board of Agricu	lture, Divis	sion of Water Resources
City, State, ZIP Co	de Malver	n, PA 19335				Application Num	ber:	
LOCATE WELL WITH AN "X" IN	S LOCATION SECTION BOX:							3
T	N							/r
1 1		ı						npinggpm
. NW	NE NE							
	!							nping gpm
W W	_ 	1						. to ft
- ''		1	TO BE USED AS:			-		Injection well
SW	J SE	1 Domestic						Other (Specify below)
J		2 Irrigation	4 Industrial	7 Lawn and g	arden only	10 Monitoring well		(1 - /
<u> </u>	<u> </u>	Was a chemic submitted	al/bacteriological sam	ple submitted t		nt? YesNo ∨ Vater Well Disinfected		mo/day/yr samble was No ✓
TYPE OF BLAN	K CASING USED:		5 Wrought iron	8 Conc				I Clamped
1 Steel	3 RMP (S		6 Asbestos-Cemen		(specify be			ed
2PVC	4 ABS	. 4	7 Fiberglass		` '			nded. 🗸
		in to						. in. to ft
								o Sch. 40
TYPE OF SCREEN			. iii., weigitt	(7)PV			stos-ceme	
			C Cibosoloso					
1 Steel	3 Stainles		5 Fiberglass)
2 Brass		zed steel		9 AB	S		used (op	•
SCREEN OR PERF				zed wrapped		8 Saw cut		11 None (open hole)
1 Continuous		/lill slot		e wrapped		9 Drilled holes		
2 Louvered s		Key punched	7 Toro					
SCREEN-PERFOR	ATED INTERVALS							to
ODAY (EL	DAGIK INTERMALO							to ft
GRAVEL	PACK INTERVALS							to ft
GROUT MATER		cement	2 Cement grout	3 Bento				
			ft., From	J ft.				ft. to ft
What is the neares	t source of possible	e contamination:				estock pens		oandoned water well
 Septic tank 	4 Late	ral lines	7 Pit privy		11 Fu	el storage	15 O	il well/Gas well
2 Sewer lines	5 Ces		8 Sewage la	goon		rtilizer storage	16 O	ther (specify below)
3 Watertight se		page pit	9 Feedyard			ecticide storage		
Direction from well'	?					any feet?		
FROM TO		LITHOLOGIC	LOG	FROM	то	PLU	IGGING IN	MERVALS
0 0.5	Grass and to							
0.5		ark Gray to B						
8 13		<u>eige to Brown</u>						
13 18.5	Clay w/silt, I	t. To Med. G	ray					
	1							
						MW14, Flushmount		
						,		
					1			
						Ī.		
	OD LANDCAN	DIO CEDITICAT	IONI: This water wall	was (1) a i	intod (O)	nonotrusted == (2) =	lugges al	dor my juriodiation
			ION: This water well v	was 1) constru				
and was completed	on (mo/day/year)		11/2/2010		. and this	record is true to the	best of my	knowledge and belief.
and was completed Kansas Water Well	on (mo/day/year) Contractor's Licer				. and this Record wa	record is true to the is completed on (mo/o	best of my	
and was completed (ansas Water Well under the business	on (mo/day/year) Contractor's Licer name of	nse No		his Water Wel	and this. Record wa by (sign	record is true to the is completed on (mo/onature)	day/yr	knowledge and belief.
d was completed ansas Water Well der the business INSTRUCTIONS:	on (mo/day/year) Contractor's Licer name of	nse No		his Water Wel	and this Record wa by (sign	record is true to the is completed on (mo/onature)	day/yr answers. S	knowledge and belief. 2 C/ 0 end top three copies to Kansas