WATER WELL REC	CORD	Form WWC-	·5	Division of Wate	er Resources; App. No.		
1 LOCATION OF WA	TER WELL:	Fraction	1	Section Number	Township Number	Range Number	
County: Sumn	er	SE 1/4 NW 1/4 N	W 1/4	16	T (\$)32	R EW	
located within city?	from nearest town or cit	y street address of wo	ell it	Giobai Positioning Latitude:	Systems (decimal deg	rees, min. of 4 digits)	
located within city.							
2 WATER WELL OW	NER: Bradu D	Valker		Elevation:			
RR#, St. Address, Box	NER: Brady V	ern AM		Datum:			
City, State, ZIP Code	Wellingto	n KS		Data Collection	Method:		
3 LOCATE WELL'S	4 DEPTH OF COMP		. (ي.).	ft.			
LOCATION	D (1 (-) C 1 1	C		Φ (2)	Α (2)	0	
WITH AN "X" IN	WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered (1)						
N SECTION BOX.							
	Est. Yieldgpm:						
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well							
W E 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)							
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well							
SW SE Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs							
Sample was submitted							
S							
5 TYPE OF CASING U			rete tile	CASIN	G JOINTS: Glued.X.	Clamped	
Steel 3 RMI				below)			
2 PVC 4 ABS	7 Fiberglass	0. D't			Threaded	L	
Blank casing diameter							
Casing height above land surface							
1 Steel 3 Stainless Steel 5 Fiberglass 7PVC 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 Gauzed 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)							
SCREEN-PERFORATED INTERVALS: From							
From							
GRAVEL PACK INTERVALS: From Q. Y. ft. to ft., From ft. to ft.							
From ft. to ft., From ft. to ft.							
6 GROUT MATERIAL	: 1 Neat cement 2 C	Cement grout 3 Be	ntonite	4 Other			
Grout Intervals: Fro	m ft. to	ft., From		ft. to f	t., From	ft. toft.	
What is the nearest source							
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide storage 16 Other (specify							
2 Sewer lines			1 Fuel st		bandoned water well l well/gas well	below)	
Direction from well?		2			gas well	••••••	
FROM TO	LITHOLOGIC	LOG	FROM	TO	PLUGGING INT	ERVALS	
0 2 $$	102 ac						
A X X	an						
23 39 F	ne Sand						
39 60 B	hu Shale		ļ				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged							
under my jurisdiction and was completed on (mo/day/year) 3-1 2							
under the business name of have hardless by (signature)							
INSTRUCTIONS: Use typew	riter or ball point pen. PLEAS	SE PRESS FIRMLY and F	PRINT clear	rly. Please fill in blank	s, underline or circle the co	orrect 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.kdheks.gov/waterwell/index.html.							