,	WATE	R WELL RECOR	RD Form W	WC-5 KSA 82	a-1212		
1 LOCATION OF WATER WELL	Fraction	CW/	1/6	Section Number		Range Number	2
Distance and direction from pearestytown	or city street p	ddress of well, if	Acated within	city?	1 2 2 °	1 R / F	, w
1019 ('R	STUA	W W	ellina.	tol			
2 WATER WELL OWNER:	best 1	1etz	7				
RR#, St. Address, Box # :	Cresi	Way		_	Board of Agriculti	ure, Division of Water Reso	ources
City, State, ZIP Code	Vineto	10 151	07152		Application Numb	per:	
LOCATE WELL'S LOCATION WITH A AN "X" IN SECTION BOX:		OMPLETED WE	LL	ft. ELEV			
ND		water Encounter			2		ft.
					after hour	ay/yr 7-13-9	<b>gpm</b>
NW   NE     E						s pumping	v.
	1.77					in. to	
× I I E N	ELL WATER T	O BE USED AS	S: 5 Public	water supply	8 Air conditioning	11 Injection well	
SW SE	1 Domestic	3 Feedlot	/2		- /	12 Other (Specify below)	
	2 Irrigation	4 Industri	, ,	-	* <b>V</b>		
	vas a cnemicai/i nitted	bacteriological sa	ample submitte		Yes; If	f yes, mo/day/yr sample wa	as sub
5 TYPE OF BLANK CASING USED:	iiileu	5 Wrought iron	n 8	Concrete tile			
teel 3 RMP (SR)		6 Asbestos-Ce		Other (specify belo		Welded	
2 FVC 4 MS	A	7 Fiberglass				Threaded	
Blank asing diameter in	y toy . Fig.	ft., Dia			ft., Dia		/ ft.
Casing height above land surface	Warner of the last	.in., weight		<b>1</b> lbs	s./ft. Wall thickness or gau		. است
TYPE OF SCREEN OR PERFORATION  1 Steel 3 Stainless s		5 Fibereless	7	7 PVC 8 RMP (SR)	10 Asbestos-		
2 Brass 4 Galvanized		5 Fiberglass 6 Concrete tile		9 ABS	12 None use	ecify)	
SCREEN OR PERFORATION OPENING			Gauzed wrap			11 None (open hole	e)
1 Continuous slot 3			Wire wrapped		9 Drilled holes	•	,
2 Louvered shutter 4 Key	punched	n6 7	Torch cut	$\sim$	10 Other (specify)		
SCREEN-PERFORATED INTERVALS:	From	ر الرجار	t. to	•		ft. to	
GRAVEL PACK INTERVALS:	From	1	t. to			ft. to ft. to	
GRAVEL FACK INTERVALS.	From	1/-/	t. to Le t. to	ft., Fr		ft. to	ft.
6 GROUT MATERIAL: // Neat ce	ment A	2 dement grout					
Grout Intervals: Fromft	. to /	ft., From		. ft. to	ft., From	ft. to	ft.
What is the nearest source possible co						14 Abandoned water well	
1 Septic tank 4 Lateral		7 Pit pr	•		-	15 Oil well/Gas well	
2 Sewer lines 5 Cess p 3 Watertight sewer lines 6 Seepag		9 Feed	ige lagoon		tilizer storage ecticide storage	16 Other (specify below)	
Direction from well?	421	3 1 660	yaiu		gany feet?	/)	
FROM TO	LITHOLOGIC	LOG	FR	ом то		NG INTERVALS	
n n lon	$S_{N}/$						
101.					OVERTAL STREET		
	. /						
1. 21 /10	1						
		1					
	10	Med					
11 1/5/ 1/11/	$\mathcal{H}$	11/1001	X	10			
0 10 1110							
			~ <i>(</i> ) \	$\cap$			
ad 16 Chai	MAN	V	KA	10			
3X 105/ 11W	(1)0	$\mathcal{A} \supset$	81 4	$\mathcal{A}$			
10010							
		4	_/_	)) 1	l		
7 CONTRACTOR'S OR LANDOWNER'S	SCERTIFICAT	N: This water	well was (1)	/		d under my jurisdiction and	
completed on (mo/day/year) /	15/10	A This 14	Votor Wall De-		cord is true to the best of r	y kyrowledge and belief. K	lansas
Water Well Contractor's License No under the business name of	7/9/2	1/1/1/1	valer vveil Hec	ord was completed by (sign			
INSTRUCTIONS: Use typewriter or ball point pe	en. PLEASE PRESS	FIRMLY and PRINT	clearly. Please fill	blanks, underline or ci	rcle the correct answers, send to	three copies to Kansas Departmen	ent
of Health and Environment, Bureau of Water, T	opeka Kansas 666	20-7320. Telephone:	913-296-5545. Send	one to WATER WELL	OWNER and retain one for your	records.	