		WATER	R WELL RECORD	Form WV	/C-5 KSA 8	2a-1212			
1 LOCATION OF W		Fraction SE 1/4		NE 1/4	Section Number	er Town	nship Number	Range I	
Distance and direction	on from nearest town of	or city street ac	dress of well if loo		<u>35</u> ty?	<u> </u>	32 s	R 36	K /W
	South XXX of N						- under		
2 WATER WELL C		MXXXXXX	nxnxsnxixn)	6 Mr. Wi	lbur White			District of Ma	
RR#, St. Address, E City, State, ZIP Cod		Moscow	Kansas 679	952			ard of Agriculture, olication Number:		ter Resources
			OMPLETED WELL) # 515\				
AN "X" IN SECTI			vater Encountered						
I I			WATER LEVEL .						
	1 1 1 1		test data: Well v					•	
	Es		gpm: Well v						
N 1			ter. 97./ 8in.						
-		XXXDomestic	O BE USED AS: 3 Feedlot		water supply		litioning 11 ring 12		below)
sw -	- SE	2 Irrigation	4 Industrial				ation well .		
	Wa	•	acteriological samp		•				
1	S mit	tted		-7		ater Well Dis	sinfected? Yes	XX No	
TYPE OF BLANK CASING USED:			-			/ater Well Disinfected? Yes XX No CASING JOINTS: Glued . XX . Clamped			
1 Steel 3 RMP (SR) XXX PVC 4 ABS			6 Asbestos-Cement 9 Other (specify be						
1	4 ABS er5in.	to 250	7 Fiberglass						
									•375
	OR PERFORATION M	XXX PVC			os./ft. Wall thickness or gauge No				
1 Steel 3 Stainless steel			5 Fiberglass 8 RMP (SR						
2 Brass				6 Concrete tile 9 ABS			12 None used (d	. ,	1.
	SCREEN OR PERFORATION OPENINGS ARE:			5 Gauzed wrapped			ut	11 None (op	en hole)
1 Continuous s 2 Louvered sh			6 Wire wrapped 7 Torch cut			9 Drilled holes 10 Other (specify)			
SCREEN-PERFORA	, ,		250 ft. to		O ft Fr	om	(specify) ft.	to	
			ft. to						I .
GRAVEL F	ACK INTERVALS:	From	.10 ft. to	o 27	'.Q ft., Fr	om	ft.	to	
		From	ft. t		ft., Fr			to	
6 GROUT MATERIA			2 Cement grout						
	omQft. source of possible con							ft. to Abandoned wat	
1 Septic tank	4 Lateral li		7 Pit privy			estock pens el storage		Oil well/Gas we	
2 Sewer lines 5 Cess pool		8 Sewage lagoon			tilizer storage		Other (specify b	1	
3 Watertight sewer lines 6 Seepage pit						tilizer storage 16 Other (specify below)			
Direction from well?		LITUOL COLO		1		any feet?			
FROM TO 3	Fine Sand	LITHOLOGIC L	.OG	FROM	и то		LITHOLO	GIC LOG	SEC
3 27	Clay								
27 34	Fine Sand								
34 65	Clay								· .
65 71	Fine Sand								
71 82	Clay								
82 110	Fine Sand Clay & MANY	TVWILVILVI T	N 0 - 3						
			ine Sand						
110 207		Graval		1	I				
110 207 207 270	Clay & Med.	Gravel							
110 207		. Gravel							
110 207 207 270	Clay & Med.	Gravel							
110 207 207 270	Clay & Med.	Gravel							
110 207 207 270	Clay & Med.	Gravel							7
110 207 207 270 270 300	Clay & Med.		DNI: This water	II woo (1) ss-	etrioted (0)		or (2) over	oder my i vice di -	**
110 207 207 270 270 300	Clay & Med.	CERTIFICATIO	DN: This water we	il was (1) con	structed, (2) re	constructed, o	or (3) plugged ur	nder my jurisdic	tion and was
110 207 207 270 270 300 7 CONTRACTOR'S	Clay & Med. Clay OR LANDOWNER'S y/year) March	CERTIFICATION 1. 21, 1986) <i></i>		. and this red	ord is true to	the best or pack	nowledge and b	tion and was
110 207 207 270 270 300 7 CONTRACTOR'S completed on (mo/da Water Well Contracto under the business results)	Clay & Med. Clay OR LANDOWNER'S y/year) March or's License No ame of FRIESEN W	CERTIFICATION 1. 21, 1986	This Wate	r Well Record	. and this red I was completed by (sign	cord is true to d on (mo/day nature)	the best of pick	nowledge and b March 24,	tion and was elief. Kansas 1986.
110 207 207 270 270 300 7 CONTRACTOR'S completed on (mo/da Water Well Contracta under the business r INSTRUCTIONS: Us three copies to Kansa	Clay & Med. Clay OR LANDOWNER'S y/year) March or's License No ame of FRIESEN W e typewriter or ball poir is Department of Health	CERTIFICATION 1. 21 . 1986	This Wate	r Well Record	and this red was completed by (sign learly, Please fill	cord is true to d on (mo/day nature)	the best of milk	March 24,	tion and was elief. Kansas 1986.
110 207 207 270 270 300 7 CONTRACTOR'S completed on (mo/da Water Well Contracto under the business r	Clay & Med. Clay OR LANDOWNER'S y/year) March or's License No ame of FRIESEN W e typewriter or ball poir is Department of Health	CERTIFICATION 1. 21 . 1986	This Wate	r Well Record	and this red was completed by (sign learly, Please fill	cord is true to d on (mo/day nature)	the best of milk	March 24,	tion and was elief. Kansas 1986.