OHILL H					
BH-9/MW-7		R WELL RECORD	Form WWC-5 KSA 828		Danna Number
1] LOCATION OF WATER WEL	L: Fraction	SF " 11	W 1/4 Section Number		Range Number
County: Comun Chic		<u> </u>		1 7 33 s	I R ZO ENV)
115 1 11	1	rch alon			
2 WATER WELL OWNER:			9 rive st		
_		rder dway	J	Board of Agricultura I	Division of Water Becourage
RR#, St. Address, Box # :	HI N Broo	11.4(1.)	. <del>7</del>	Application Number:	Division of Water Resources
City, State, ZIP Code :	FIOTECTION	K50 6712			
J LOCATE WELL'S LOCATION AN "X" IN SECTION BOX:				ATION: N.A	
N				2 ft. 3	
Ŧ	1 3		•	rface measured on mo/day/yr	I I
NW NE	!			after hours pu	
1   1/2   1		T. 7 1/2		after hours pu	
# w   - ! - ! - ! - ! - !		-		andin.	
<u>₹</u> "			5 Public water supply	•	Injection well
1 SW SE	1 Domestic			9 Dewatering 12	
	2 Irrigation			Monitoring well	1 4
ļ <u> </u>	Was a chemical/l	pacteriological sample s	submitted to Department? Y	es; If yes,	mo/day/yr sample was sub-
<u> </u>	mitted			ter Well Disinfected? Yes	No X
5 TYPE OF BLANK CASING U	_	5 Wrought iron	8 Concrete tile		ا Clamped ا
	RMP (SR)	6 Asbestos-Cement	9 Other (specify below	,	ed
EPVC 3 A		7 Fiberglass			ided. Flush
Blank casing diameter					
Casing height above land surface	eFlush	.in., weight		ft. Wall thickness or gauge No	o
TYPE OF SCREEN OR PERFO			C7 PVC	10 Asbestos-ceme	nt
1 Steel 3 S	Stainless steel	5 Fiberglass	8 RMP (SR)	11 Other (specify)	
2 Brass 4 0	Salvanized steel	6 Concrete tile	9 ABS	12 None used (op	en hole)
SCREEN OR PERFORATION O		5 Gauz	ed wrapped	8 Saw cut	11 None (open hole)
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes					
2 Louvered shutter	4 Key punched	7 Torch	cut all the	10 Other (specify)	
SCREEN-PERFORATED INTER	RVALS: From			m ft. te	
From					
GRAVEL PACK INTER	RVALS: From	. <b>6</b> ft. to	. 24. 7. S ft., Fro	m ft. to	o
	From	ft. to	ft., Fro		The state of the s
_		2 Cement grout		Other	
		ft., From	ft. to	ft., From	. ft. to
What is the nearest source of p					pandoned water well
·	4 Lateral lines	7 Pit privy	11 Fuel		il well/Gas well
	5 Cess pool	8 Sewage lage		•	ther (specify below)
3 Watertight sewer lines	1	9 Feedyard		ticide storage	
Direction from well?		100	How ma		TERMAN
FROM TO	LITHOLOGIC		FROM TO	PLUGGING I	VIERVALS U
0.0 15.0 Cla	y sur, ve	y plastic			
15.0 20.5 C/a	y, sury,	utry plastic			
20 5 2/10 01	very fine ban	dy day Strin	grs		
20.5 24.0 Clay	1, sury, ve	m plastic	1		
24 20 20 20	ry time sandy	y Clay String	145   I		
24.0   25.0   San		, Sulty 4			
Clau	yey '	·			
m <sub>a</sub>	1 1 1 1 1 1 1		1 161	- / 1/ 0>	
I I I I I I	itor Well 1	was vers	granted or	7 6-11-42	
	INIT To	0101	Y 1 - 1		
TOP	KDHE IU	131 HUM	for 4 ouch	s service	
- t bu	1 Don T	aylor.			
	3				
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) 6.30.7/					
Water Well Contractor's License	ур , <del>. Э. Э. I</del>	/ 🔺	ell Record was completed	on (mo/day/yr)7.–.2.7	79.2
under the business name of	ocotech nice	1 Services,			truca
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					