	WA	TER WELL RECORD F	orm WWC-5 KSA 82	a-1212		
1 LOCATION OF WATER W	/ELL Fraction	er Alui	Section Number	i	Range Number	
County: RAWLINS		1/4 SE 1/4 NW		т <u>З</u> s	R 34 EW	
Distance and direction from			Street address of well if	located within city?		
2 WATER WELL OWNER:		205				
RR#, St. Address, Box # : City, State, ZIP Code : Arwood Ks 61130			•	Board of Agriculture, Division of Water Resources		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		(s 67730	<u> </u>	Application Number		
3 DEPTH OF COMPLETED	D WELL/55ft	Bore Hole Diameter			in. to ft.	
Well Water to be used as:	5 Public water		8 Air conditioning	11 Injection w		
1)Domestic 3 Feedlot		* * *	9 Dewatering	12 Other (Spe	ecify below)	
2 Irrigation 4 Industria	al 7 Lawn and 9	garden only	10 Observation well	2#	. day	
Well's static water level	<u> </u>				The state of the s	
Pump Test Data WONE	gpm: Well water was			hours pumping	gpm gpm	
4 TYPE OF BLANK CASIN	IG USED:	5 Wrought iron	8 Concrete tile		uedClamped	
1	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify belo	•	elded	
		7 Fiberglass			readed	
Blank casing dia	in. to	ft., Dia	in. to	ft., Dia	in. to ft	
					e No 5/16 OR, 3/2	
TYPE OF SCREEN OR PER			ØPVC	10 Asbestos-ce		
ł	3 Stainless steel	5 Fiberglass	8 RMP (SR)	` '	ify)	
	4 Galvanized steel		9 ABS	12 None used	` '	
Screen or Perforation Openii	ngs Are:  (3)Mill slot		wrapped	` ` ` ` `		
1 Continuous slot		6 Wire wi	• •		Drilled holes Other (specify)	
2 Louvered shutter Screen-Perforation Dia.				10 Other (specify)		
Screen-Perforated Intervals:					oiii to	
Screen removated intervals.					»	
Gravel Pack Intervals:					o	
Graver rack intervals.	From	ft. to	ft., From	ft. to		
5 GROUT MATERIAL:	1 Neat cement	©Cement grout	·			
					ft. to	
What is the nearest source of					Abandoned water well	
1)Septic tank	4 Cess pool	7 Sewage lagoo		J	Oil well/Gas well	
2 Sewer lines	5 Seepage pit	8 Feed yard			Other (specify below)	
3 Lateral lines	6 Pit privy	9 Livestock pen	s 13 Wate	ertight sewer lines .		
Direction from well						
Was a chemical/bacteriological sample submitted to Department? Yes						
was submitted						
If Yes: Pump Manufacturer's	name		Model No		Volts	
Depth of Pump Intake		ft.	Pumps Capacity rated a	t <i></i>	gal./min.	
Type of pump:	1 Submersible			trifugal 5 Reciproca		
6 CONTRACTOR'S OR LA	INDOWNER'S CERTIFIC			constructed, or (3) plugged	under my jurisdiction and was	
completed on	<i>.</i> <del>1 </del>	month		7.9	year	
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No						
This Water Well Record was			onth 6	. day 8 . 9	year under the business	
name of $HH$	DRILLING		y (signature)	y C Bearles	<u> </u>	
7 LOCATE WELL'S	TION FROM TO	LITHOLOGI			/LITHOLOGIC LOG	
WITH AN "X" IN SECTI	<u> </u>					
N	2 80					
1	80 /30	1 0	NP			
1 NW NE	/30 /33					
	133 143	SAND,				
- W - 1 - 1	143 156	L JAND & G.	RAVEL			
SW SE	152 150	SHALE				
S						
ELEVATION:	to a second and the s					
Depth(s) Groundwater Enco		4.0				
					sheet if needed) prrect answers. Send top three	
copies to Kansas Departmen	t of Health and Environme	nt, Division of Environment, \	Vater Well Contractors, To	ppeka, KS 66620. Send one	to WATER WELL OWNER and	
retain one for your records.						