			ATER WELL RE	CORD	Form WWC-5		2a-1212	ID No						
LOCATION OF WATER WELL: Fraction County: Marshall SE 1/2				2.77		Section Number		Township Number		Range Number				
				4 NE		1/4	20		T 5	S	R		€ M	
					of well if located	-	/?							
5 Sou	I th, 1 RWELLOW	<u>East & :</u> NER: Ed P:	<u>‡ North</u> ralle	of B.	lue Rapio	ls								
	ddress, Box	# : R.R.	Rapids,	KS (56411				Board of Ac Application		ivision of	Water F	esources	
		CATION WITH	4 DEPTH OF	COMPLE	TED WELL	142	ft. E	LEVAT	ION:					
	N SECTION		Depth(s) Grou	undwater	Encountered	.1		ft.	2	ft, 3.	·/·m··/·m··		ft.	
	N.		WELL'S STAT	TIC WATE	R LEVEL 96	?ft.	below land	surface	2 measured on mo	/day/yr .1.0	/8/04	· · · · · · · · · · · · · · · · · · ·		
		i							fter					
NW NE Est. Yield							t. after hours pumping gpm 8 Air conditioning 11 Injection well							
		1	1 Domest	3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify								w)		
w —	1	E	2 Irrigation	n 4	Industrial 7	Domestic	(lawn & gar	den) 1	0 Monitoring well	Lives	TOCK			
		1												
-	-SW	- SE - *	Was a chemic	cal/bacter	iological sample	submitted	to Departm		es No*		o/day/yrs			
mitted									Water Well Disinfected? Yes * No					
	<u>'</u> \$					•								
5 TYPE	OF BLANK C	CASING USED:		5 Wro	ought iron		ncrete tile		CASING JO	NTS: Glued	. .	Clamped	t	
1 Steel 3 RMP (SR)					6 Asbestos-Cement		9 Other (specify below)				ed			
2 PVC 4 ABS Blank casing diameter					7 Fiberglass						ided			
Casing height above land surface					weight		PVC_	1		estos-Cem				
1 Steel 3 Stainless Steel					erglass		RMP (SR)			er (Specify)				
2 Brass 4 Galvanized Steel					ocrete tile		ABS			e used (op				
SCREEN (OR PERFOR	RATION OPENI	NGS ARE:		5 Guaz	ed wrapp	ed		8 Saw cut		11 None	(open l	nole)	
1 Con	tinuous slot	3 N	/lill slot			wrapped			9 Drilled holes					
2 Lou	vered shutte	r 4 k	Key punched		7 Torch				10 Other (specify					
SCREEN-F	PERFORATE	ED INTERVALS	: From	1.22	ft. to	1.4.2.	ft.,	From .		ft. to			ft.	
,	SRAVEL PAG	CK INTERVALS	From	30	ft. to ft. to	142	ft.,	From .		ft. to			tt.	
`	SI I/ (V LL I / (SIC HATELTANEC	From		ft. to	· · · · · · · · · · · · · · · · · · ·	ft.,	From .		ft. to		· · · • • • · · · · · · · · · · · · · ·	ft.	
	IT MATERIA		at cement	2 C	ement grout	_3 E	Bentonite_		Other					
					ft., From				ft., From					
_			contamination:		7 Div				ock pens		bandoned		vell	
1 Septic tank 4 Lateral lines 2 Sewer lines 5 Cess pool					7 Pit privy				storage 15 Oil well/Gas lizer storage 16 Other (speci					
2 Sewer lines 5 Cess pool 3 Watertight sewer lines 6 Seepage pit					8 Sewage 9 Feedyard	_			cide storage	10 0		-		
Direction fr				3 Teedyan	J		w many	-						
Direction from well? Southwest FROM TO LITHOLOGIC			IC LOG		FROM		, many		ΓERVALS					
0		Topsoil				1							-	
1				imes	tone & F	lint		+						
54		Gray Sh												
83		REd Sha						1					,	
96		Gray Sh												
134			ne (Whit	te/Ha	rd)				-	CCEIL	/FD			
139	142	142 Gray Sh		ale			REU			EOLIN				
									RECEIVED NOV 1 0 2004 BUREAU OF WATER					
				····		ļ								
7 CONTR	ACTOR'S O	R LANDOWŅE	R'S CERTIFIC	ATION: T	his water well w	as (<u>1) cor</u>	nstructed, (2) recor	nstructed, or (3) p	lugged und	er my juri	sdiction	and was	
completed of	on (mo/day/y	ear)10/8	3/04				and t	this reco	ord is true to the be	est of my kn	owledge a	nd belie	f. Kansas	
Water Well	Contractor's	Licence No	5.L8	, Dri	This Water	Well Rec	ord was con	npleted	on (mo/day/yr)	<u>-</u>	, , , , , , , , , , , , , , , , , , ,			
unidoi ino D	adinous nan	o o Diu	C Valley	ν_{\perp}				ry (o	ignaturo)					

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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, 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.