			ALER MELL REC	CORD Form WWC-5	KSA 82a-		***				
LOCATION OF WATER WELL:			Fraction			tion Number	Township N	Township Number		Range Number	
County: OSBORNE				NW 1/4 NR	· · · · · · · · · · · · · · · · · · ·	1B	<u> </u>	S	R /	- EM	
Distance and direction from nearest town or city street address of well if located within city? LAT: 39° 26,960											
110 MARWRY AUR, OSBIRNA, KI LON: 9B 41.546											
2 WATER WELL OWNER: LANCE WOLTERS											
RR#, St. Address, Box # : 1/0 MERCURY AUR Board of Agriculture, Division of Water Resources											
City, State,		OSBOX	enk KS	<i>67473</i>	-		Application				
3 LOCATE WELL'S LOCATION WITH 4 DEPTH OF COMPLETED WELL											
AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1											
	1	1		ump test data: Well water							
	NW 🗶	1		gpm: Well water							
	·NW	- NE			Public water s		8 Air conditionin	g 11 I	njection well		
								Other (Specify			
W E 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well . C											
SW SE Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs sample was											
mitted Water Well Disinfected? Yes No									No L		
S											
5 TYPE C	F BLANK C	ASING USED:		5 Wrought iron	8 Concre				ed Clar	•	
1 Steel		3 RMP (S	R)	6 Asbestos-Cement	9 Other	specify belo	w)		ded		
2 PVC		4 ABS		7 Fiberglass					eaded		
Blank casin	g diameter			200 ft., Dia		in. to	π., D	a	in. to	π.	
			_	MATERIAL: 7 PVC							
TYPE OF SCREEN OR PERFORATION MA 1 Steel 3 Stainless Stee								0 Asbestos-Cement 1 Other (Specify)			
1 Steel 3 Stainless St 2 Brass 4 Galvanized			•		9 AE	MP (SR) IS		12 None used (open hole)			
		ATION OPENI	NGS ARE:	5 Gua	zed wrapped		8 Saw cut	·	11 None (or	nen hole)	
1	inuous slot		Mill slot		wrapped wrapped		9 Drilled holes		11 140116 (0)	,en noie,	
	ered shutter		Key punched	7 Toro	• •		10 Other (speci	fy)		ft.	
SCREEN-PERFORATED INTERVALS: Fromft. toft., Fromft. toft.										ft	
CONLETT	2111 0111111		From	ft. to		ft., Fro	m	ft. t	o	ft.	
GRAVEL PACK INTERVALS: Fromft. toft., Fromft., Fromft. toft.											
			From	ft. to	••••••	ft., Fro	m	ft. t	0	ft.	
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 4 Other											
Grout Intervals: Fromft. toft., Fromft. toft. ft. toft.											
1			e contamination:				estock pens		Abandoned wa		
· ·			ral lines 7 Pit privy		1	11 Fuel sto		storage 15			
2 Sewer lines 5 Ces				8 Sewage lag					Other (specify		
	ertight sewe		page pit				secticide storage				
Direction from	om well?	WES		•		How m	any feet? 27	2	_		
FROM	ТО		LITHOLOG	IC LOG	FROM	ТО			NTERVALS		
0	5	SOIL			197	200	SHALK, O	MAL	•		
5	14	SANDY	CIAY				July Ung				
14	55	CLAY									
55	62		/ GRAVE L	_							
62	75	SHALL									
75	76	LIMESO									
76	106	SHALH	CRAY								
1010	107	LIMA	South								
/07	180	SHAIR	GOAY								
180	182	LIMBS	mus s								
187	187	SHAIR	GIAY								
187	IRR	TAUR S	conte								
188	195	SHALL	LAMY								
195	197	LIME	STONE		,						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This well was (1) onstructed, (2) reconstructed, or (3) plugged under my jurisdiction and was											
completed on (mo/day/year)											
1		Licence No	760				eted on (mo/day/yr)	1A-1	06		
	usiness nam		OCEANE				y (signature)	-	/h 1	(1/)	
		// 03	oen. PLEASE PRESS	OFTINES OF PRINT CLEARLY, Plea	se fill in blanks. ur			op three coni	es to Kansas Denar	tment of Health	
and Enviro	INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send on 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. Fe	records. Fee of \$5.00 for each constructed well.										