WA	ATER WELL	RECORD	Form WW	C-5	Division of Wat	er Resources; App. No.	
1	LOCATION OF County: GA	WATER WELL:	Fraction <b>NE</b> 1/4 <b>SE</b> 1/4	SF 1/4	Section Number	Township Number T 7 S	Range Number R <b>72</b> EW
	Distance and direction from nearest town or city street address of well if			well if	Global Positioning Systems (decimal degrees, min. of 4 digits)		
	located within city		C 1 11:00 1: -		Latitude:		
2	WATER WELL OWNER: Cleon Davis				Longitude: Elevation:		
-	RR#, St. Address	s, Box # : 312	7 W RD		Datum:		
	City, State, ZIP C	7 1	City Ks 67	1/42	Data Collection	Method:	
3	3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL						
	LOCATION						
	WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered (1)						
	N Pump test data: Well water was						
Est. Yield. <b>3.0</b> gpm: Well water wasft. after hour							gpm
	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well						
W							
	Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs						
	Sample was submitted						
S							
5		NG USED: 5 W		oncrete tile		G JOINTS: Glued	
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded							
Bla	ank casing diamete	er <b>6</b> in. <u>t</u> o .	ft., Diameter	i	n. to ft.	, Diameter	in. toft.
Casing height above land surfacein., Weightlbs./ft. Wall thickness or guage No							
TY		OR PERFORATION		0.4	DC	11 Other (Smeeth)	
1 Steel 3 Stainless Steel 5 Fiberglass							
SC		ORATION OPENIN		,		r= //one abea (open	
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)							
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw cut 10 Other (specify)							
From							
GRAVEL PACK INTERVALS:         From							
From ft. to ft., From ft. to ft.							
6 GROUT MATERIAL: 1 Neat cement							
	out Intervals:	From . 3.9 f	t. to <b>3.2</b> ft., From	4	ft. to . grand	ft., From	ft. toft.
What is the nearest source of possible contamination:							
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide storage 16 Other (specify Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below)							
	3 Watertight se				0		below)
Di	rection from well?				y feet? 3.00.		
FR	OM TO		DLOGIC LOG	FROM	ТО	PLUGGING INT	ERVALS
_	/ 20	set och	ay				
3	20 52	sand					
	52	ARASE					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was  constructed, (2) reconstructed, or (3) plugged							
under my jurisdiction and was completed on (mo/day/year) 7.6 9 and this record is true to the best of my knowledge and belief.							
Kansas Water Well Contractor's License No. 300 km. This Water Well Record was completed on (mo/day/year) . 8 - 2 - 09 under the business name of South left well Della by (signature) . It was a like the second was completed on (mo/day/year) . 8 - 2 - 09 under the business name of South left well Della by (signature)							
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT learly. Please fill in blanks, underline or circle the correct answers. Send top							
thre	e copies to Kansas De	partment of Health and E	nvironment, Bureau of Water, Ge	ology 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. Visit us at http://www.kdheks.gov/waterwell/index.html.							
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