			WATER	WELL RECORD	Form WWC-5		2a-1212		
County:	ON QE WAT	MAS	Fraction 5 E 1/4	SE 1/4 S	- 14	Tion Number	T Township N	lumber S	Range Number
Distance a	ina direction	from nearest town	m. N2						
WATER	R WELL OW	NER: W.E	COOP						
	Address, Box		Box 5		٥,		Board of	Agriculture,	Division of Water Resource
,	, ZIP Code		OLBY.	KS	67	701		n Number:	
LOCATE		OCATION WITH 4	DEPTH OF COL	MPLETED WELL.	QO NA	. ft. ELEV	/ATION:		3
Wile w	- NW	W	ELL'S STATIC W Pump t st. Yield	VATER LEVEL Delets data: Well wategpm: Well wate erin. to.	y ft. b r was r was	elow land s ft ft.	surface measured o after after	n mo/day/yr . hours pu . hours pu in	### ##################################
-	i	i '	1)Domestic					12	Other (Specify below)
-	- SW	SE	2 Irrigation						
	-	X W	•						, mo/day/yr sample was sub
į L	'!		itted				Vater Well Disinfect		No
5 TYPE (OF BLANK C	ASING USED:		5 Wrought iron	8 Concr	ete tile	CASING JO	INTS: Glue	d Clamped
1)st		3 RMP (SR)		6 Asbestos-Cement	9 Other	(specify bel	low)	Welc	ied
2 PV		4 ABS		7 Fiberglass					aded
Blank casi	na diameter	5 11 in	to	ft Dia					in. to ft.
Casing he	ight Bellow	ind surface .5	Re low in	n weight		lb:	s./ft. Wall thickness	or gauge N	lo
•	-	R PERFORATION		, <i></i>	7 PV			bestos-cem	
1 St		3 Stainless s		5 Fiberglass		IP (SR))
2 Br		4 Galvanized		6 Concrete tile	9 AE			ne used (or	•
		RATION OPENINGS			ed wrapped	•	8 Saw cut	2002 (0)	11 None (open hole)
	on FEDEOF Intinuous slo			6 Wire	• •		9 Drilled holes		TT HONG (open Hole)
	uvered shutt	•	punched	7 Torch				6 Δ	
		_ •	•			# =	· · · · · · · · · · · · · · · · · · ·		to
SCHEEN-	PERFURATE	ED INTERVALS:							to
Ó	GRAVEL PA	CK INTERVALS:					rom	ft.	toft.
c coour	Γ MATERIAL	. 1 Nost cor		Cement grout	(3) Bento				
Grout Inte	rvals: From		. to 8	ft., From		to Q		.	ft. toft. Abandoned water well
	eptic tank	4 Lateral		7 Pit privy			el storage		Dil well/Gas well
	•	5 Cess p		8 Sewage lage	non		rtilizer storage		Other (specify below)
2 Sewer lines 5 Cess pool 3 Watertight sewer lines 6 Seepage pit							rtilizer storage 16 Other (specify below) ecticide storage		
	-		o pit	5 i oodyara			nany feet? 150		
Direction 1 FROM	TO	Mast	LITHOLOGIC LO	OG	FROM	TO		LUGGING	INTERVALS
1110111					BO	11	0/21/		
*****			, 101 (- 101 (- 1		11	8	Bentohit	- 1101	Plua.
					8	0	Pit Floor	1 /000	ient Prout
					0		HEYF LIOU.) Can	COLLY LEVEL COLL
	1								,

						1		· · · · · · · · · · · · · · · · · · ·	
	 						1		
1	J					1	_	\ .	
		OR LANDOWNER'S	CERTIFICATIO						der my jurisdiction and was
	on (mo/day		1-88						owledge and belief, Kansas
Water We	II Contractor	's License No		This Water W	ell Record wa	as complete	d on (mo/phy/yr) .		[88]
	business na					by (sig		2 (open
INSTR	UCTIONS: Use t	ypewriter or ball point per	n. PLEASE PRESS FIR	RMLY and PRINT clearly. Pl	ease fill in blanks,	underline or ci	rcle the correct answers.	Send top three	copies to Kansas Department
of Hea	ith and Environm	nent, Bureau of Water Pro	otection, Topeka, Kans	as 66620-7320. Telephone:	913-296-5514. Se	nd one to WAT	IEH WELL OWNER and	retain one for y	our records.