		WATER WE	LL RECORD F	orm WWC-5	KSA 82a-			
LOCATION OF WA		raction	75		tion Number	Township Number	Range Number	
ounty:		5W 1/4 50		1/4	30	т <i>l</i> s	IR 33 (W)	
istance and direction	n from nearest town or cit	ty street address	s of well if located	within city?				
WATER WELL ON	WNER: JAMES	SECRES	T ESTATE					
R# St. Address. Bo	ox # : P.O. 30x	427				Board of Agricults	re, Division of Water Resources	
City, State, ZIP Code : COLBY, KS 67701					Application Number:			
				7	# ELEVAT			
AN "X" IN SECTIO	1KI B(1V)						ft. 3	
	WELL	S STATIC WAT	FRIEVEL SI	ft b	elow land surfa	ice measured on mo/da	y/yr 2:20:88	
	'						s pumping gpm	
NW	NE Est. Yi						s pumping gpm	
1 1							in. to	
w 	• • • • • • • • • • • • • • • • • • • 	WATER TO BE		Public wate			11 Injection well	
						•	12 Other (Specify below)	
sw	3t \ <u>~</u>	Irrigation						
	Was a	chemical/bacter		_	-		yes, mo/day/yr sample was sub-	
	s mitted		,			r Well Disinfected? Yes		
TYPE OF BLANK	CASING USED:	5 W	rought iron	8 Concre			Blued Clamped	
1 Steel	3 RMP (SR)	6 A:	sbestos-Cement	9 Other	(specify below)	V	Velded	
2 PVC	4 ABS	7 Fi	berglass			т	hreaded	
lank casing diameter	r 5 in. to .	.	ft., Dia	in. to		ft., Dia	in. to ft.	
							e No	
	OR PERFORATION MATE		·	7 PV		10 Asbestos-c		
1 Steel 3 Stainless steel		5 Fi			MP (SR) 11 Other (specify)			
2 Brass	4 Galvanized stee		oncrete tile	9 ABS		12 None used		
CREEN OR PERFO	RATION OPENINGS ARE	E:	5 Gauzed	wrapped		8 Saw cut	11 None (open hole)	
1 Continuous sl	ot 3 Mill slot		6 Wire wr	apped		9 Drilled holes	(0,000,000,000,000,000,000,000,000,000,	
2 Louvered shut	tter 4 Key punc	hed	7 Torch c	ut		0 Other (specify)		
CREEN-PERFORAT	ED INTERVALS: Fro	m	ft. to			` · · · ·	ft. toft.	
							ft. toft.	
GRAVEL PA							ft. toft.	
	From		ft. to		ft., From		ft. to ft.	
GROUT MATERIA			ment grout	3 Bento	nite 4 C	ther		
irout Intervals: Fro	m/3ft. to .	3	ft., From	ft. 1	:0	ft., From	ft. to ft.	
	ource of possible contami				10 Livesto		4 Abandoned water well	
1 Septic tank	4 Lateral lines		7 Pit privy		11 Fuel st	orage 1	5 Oil well/Gas well	
2 Sewer lines	5 Cess pool		8 Sewage lagoo	n	12 Fertilize	er storage 1	6 Other (specify below)	
3 Watertight sev	wer lines 6 Seepage pit		9 Feedyard		13 Insection	ide storage	None	
irection from well?					How many	feet?	•	
FROM TO		OLOGIC LOG		FROM	то	LITHO	LOGIC LOG	
37 67	Sand + (Ceravel						
ــــــــــــــــــــــــــــــــــــــ	Clays							
3 3	Cem'en-	t Levou	<u>ut</u>					
CONTRACTOR'S	OR LANDOWNER'S CEF	ATIFICATION: T	his water well was	(1) construc	ted, (2) recons	structed, or (3) plugged	under my jurisdiction and was	
mpleted on (mo/day	r/year) . 2 - 20.~.	88					knowledge and belief. Kansas	
	's License No							
der the business na						o Delly Lose	arest	
INSTRUCTIONS: Use t	ypewriter or ball point pen. PL	EASE PRESS FIRI	ALY and PRINT clearly	. Please fill in b	lanks, underline	or circle the correct answers	Send top three copies to Kansas	
Department of Health a	nd Environment, Office of Oil F NER and retain one for your re	ield and Environme	ntal Geology, Regulati	on and Permitti	ng Section, Tope	ka, Kansas 6 620-7500, Tel	ephone: 913-862-9360. Send one	