WATE	R WELL	RECORD	Form WWC-	5	Division of Water Resources; App. No.				
	CATION OF WATER WELL:  onty: (LOUD)		Fraction  NW 4 SW 1/4 S	W 1/4 S	Section N 3		Township Number T S	Range Number R E/W	
Dista	nce and dir	ection from nearest town or ci		ll if <b>G</b>			Systems (decimal degr	rees, min. of 4 digits)	
locate	ed within ci	ty?		I	_atitude:		39.30839		
2 11/4	TED WEI	I OWNED. MTCHAEL	AUTII				97,44429		
2 WATER WELL OWNER: MICHAEL RR#, St. Address, Box # : 5415 LO					Elevation:				
	State, ZIP			233	Datum:	laction l	Mathad:	- I MANALA	
City, State, ZIP Code : KANSAS CTTY, KS 66106 - 3233 Data Collection Method:  3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL									
	ATE WEI								
	H AN "X"	IN Depth(s) Groundwater	Depth(s) Groundwater Encountered (1)						
SEC'	TION BOX	K: WELL'S STATIC WA	WELL'S STATIC WATER LEVEL						
	N	Pump test data: Well water wasft. after hours pumping gp							
	Est. Yield								
	WELL WATER TO BE USED AS: 5 Public water supply  8 Air conditioning 11 Injection well  Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)								
w	W E Domestic 3 Feedlot 6 Off field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well								
l cu	, SE			,					
\ \ <b>X</b> °ï	Was a chemical/bacteriological sample submitted to Department? Yes No								
L'	Sample was submitted Water well disinfected? Yes No								
S									
		ING USED: 5 Wrought	Iron 8 Conc				G JOINTS: Glued.		
-		4 ADC 7 F11		(specify b			Tl		
Rlank ca	PVC	ter / in to (0)	ft Diameter	in	to -	fi	Diameter—	in to — ft	
Blank casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 24 in., Weight Wall thickness or guage No. 502.26									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless Steel 5 Fiberglass TPVC 9 ABS 11 Other (Specify)									
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 6 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)									
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 GRO	UT MATE	CRIAL: 1 Neat cement 2	Cement grout & Ber	ntonite 4	4 Other				
Grout Ir	itervals:	From <b>3</b> ft. to	ft., From	f	t. to	f	t., From	ft. to . <del></del> ft.	
		source of possible contaminat		0.7.1		10.7		1604 ( )	
							16 Other (specify		
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/gas well							oelow)		
		1?			_				
FROM	ТО	LITHOLOGIC		FROM	TO		PLUGGING INTI	ERVALS	
Ø	7	CLAY							
73	/3	SANDSTONE, RED							
/3	16	SHALE, LIGHT GR	AY						
16	46	SANDSTONE TAN							
46	135	SHALF, TAN							
135	1100	SANDSTONE, TAN	H20						
			791A1 2131 Ac.						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, (2) reconstructed, or (3) plugged									
under my jurisdiction and was completed on (mo/day/year)									
under the business name of ASSOCIATED DECLEMB TWO. by (signature)									
INSTRU	ctions in	name of <b>/+350cs-h</b> (4) se typewriter or ball point pen. <u>PLE</u>	ASE PRESS FIRMLY and F	RINT clearly	v. Please fi	ill in blank	s, underline or circle the co	orrect answers. Send ton	
three copi	es to Kansas	Department of Health and Environme	nt, Bureau of Water, Geolo	gy Section,	1000 SW Ja	ackson 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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