•		WATER	WELL RECORD F	orm WWC-5	KSA 82a	-1212	
.	WATER WELL:	Fraction		Sec	ction Number	Township Number	Range Number
County: 5/7	ERMAN	15W 1/4	5W 1/4 5E	1/4	22	T 8 s	R 38 €
			dress of well if located	within city?			
	EN EDSON	KS	_				
WATER WEL	LOWNER: LEON	ARD MUST	C				
R#, St. Addres		_	_			Board of Agricultu	ire, Division of Water Resource
ity, State, ZIP	Code : <i>EDSO</i>	4, KS 67	733			Application Numb	er:
LOCATE WEL	L'S LOCATION WITH	4 DEPTH OF CO	MPLETED WELL 4.1	<i>ę K</i>	ft. ELEVA	TION:	
AN X 114 SE	N BOX.						ft. 3
!	! !	WELL'S STATIC	WATER LEVEL . DR	.Υ ft. b	elow land surf	face measured on mo/da	y/yr
20	/ - NE						s pumping gpm
	1						s pumping gpm
w	F				ft., a	and	in. to
" !	! "	WELL WATER TO				8 Air conditioning	11 Injection well
sw	SE	1 Domestic				•	12 Other (Specify below)
	i	2 Irrigation					
<u> </u>	<u> </u>	Was a chemical/ba	acteriological sample su	bmitted to D	epartment? Ye	s; If	yes, mo/day/yr sample was sub-
		mitted			Wat	er Well Disinfected? Ye	s No
	ANK CASING USED:		5 Wrought iron	8 Concre			Glued Clamped
① Steel	3 RMP (S		6 Asbestos-Cement		(specify below		Velded
2 PVC	4 ABS						hreaded
							in. to ft.
			n., weight			t. Wall thickness or gaug	je No
	EN OR PERFORATIO			7 PV	_	10 Asbestos-c	ement
1 Steel	3 Stainles		5 Fiberglass		1P (SR)	11 Other (spe	cify)
2 Brass	4 Galvani:		6 Concrete tile	9 AB	S	12 None used	l (open hole)
	RFORATION OPENIN			wrapped		8 Saw cut	11 None (open hole)
1 Continuo	_	fill slot	6 Wire w			9 Drilled holes	
2 Louvered		(ey punched	7 Torch o			, , , , , , , , , , , , , , , , , , ,	
SCHEEN-PERF	DRATED INTERVALS:						ft. toft.
ODA)//	I DAOK INTERVALO						ft. toft.
GRAVI	EL PACK INTERVALS:	From	π. το ft. to				ft. toft.
GROUT MAT	ERIAL: 1 Neat		Cement grout	2 Ponto	ft., From		ft. to ft.
,							ft. to ft.
	est source of possible		II., FIOIII	IL.			4 Abandoned water well
1 Septic ta	•		7 Pit privy		10 Livest 11 Fuel s	r	5 Oil well/Gas well
2 Sewer lines			8 Sewage lagoon				6 Other (specify below)
	nt sewer lines 6 Seep	•	9 Feedvard	111		icide storage	o Other (specify below)
Direction from w	•	NE	3 i ecuyalu		How mar	٠.٨	
FROM T			06 CRITERIA	FROM	TO	7	LOGIC LOG
TD C		, ,					200,0 200
	, 2000	09 001.0	7+1				
		1					
		····					
							740-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
					1		
		Open Control (Control					
CONTRACTO	B'S OR LANDOWNE	R'S CERTIFICATIO	N: This water well wee	(1) constru	cted (2) reco	netruoted or 🙉 missand	under my jurisdiction and was
ompleted on (m	o/day/year) 7 . ~	30-88					under my jurisdiction and was y knowledge and belief. Kansas
			This Water Wel				r. /-58
nder the busine			TIIIS VARIET AVE	i necola wa	is completed to by (signat	712 110	W. OR. Flag
		nt pen. PLEASE PRESS	FIRMLY and PRINT clearly	/. Please fill in	blanks, underline	or circle the correct answers	. Send top three/copies to Kansas
Department of He	ealth and Environment, Bu	reau of Water Protection	n, Topeka, Kansas 66620-7	320, Telephoi	ne: 913-862-936). Send one to WATER WELI	OWNER and retain one for your
records.							