				ATER WE		ORD	Form	WWC-		2a-1212		No							
1 LOCATION OF WATER WELL: Fraction County: LPJUENIU OCH Sw14											Section Number			Township Number			Range Number		
							1/4		1/4	13	<u> </u>			9	S	R	22	E/W	
Distance a	and direction	from ne	earest to	own or city	street a	ddress	of well	if locate	d within city	/?									
2 WATE	R WELL OW	/NER: ¿	uki	you!	Som	1av	N,	814	H19A	MèL	J C	T.							
RR#, St. A City, State	Address, Box e, ZIP Code	(# : :	Lan	151219	K	\$ 6	06 00	43					App	olication	Number:		of Water R		
	E WELL'S LO		N WITH	4 DEPT	TH OF C	OMPLE	TED W	'ELL											
AN "X" I	N SECTION N	BOX:			s) Groun														
	1	ı		WELLS					ft. ter was										
	-NW	NE ·		Est. Yie	ld	(gpm: \	Nell wat	er was		f	ft. after			hours	pumping	.,	gpm	
	1	- INE			WATER 1				Public wat					ditioning		Injection			
w_	1		E	!	omestic rigation		Feedlot Industria		Oil field war Domestic				ewate Ionito				pecify below		
	i	i																	
-	-SW	SE		1	chemical	l/bacter	iologica	l sample	e submitted	to Depa						mo/day/y			
	X	<u> </u>		mitted								water v	well D	isinfecte	d Yes		No		
5 TYPE	OF BLANK	CASING	USED	:		5 Wro	ught iro	n	8 Co	ncrete til	e		CAS	ING JOII	NTS: Glu		Clamped		
1 Steel 3 RMP (SR)						6 Asbestos-Cement			9 Oth	9 Other (specify below					We	elded	······		
2 PV	C ing diameter		ABS	:	n to		erglass	# Die		in							in to		
	_																		
Casing height above land surface in., weight TYPE OF SCREEN OR PERFORATION MATERIAL:									7	100./1	10 Asbestos-Cement								
1 Steel 3 Stainless Steel 5 Fil							Fiberglass			8 RMP (SR)			11 Other (Specify)						
2 Bra	ss	4	Galvan	ized Steel		6 Con	crete til	le	9	ABS				12 Non	e used (open hole)		
0.147										ed wrapped			Saw o			11 No	ne (open h	ole)	
	ntinuous slot vered shutte			Mill slot Key punch	had			7 Tor	e wrapped ch cut					d holes (specify)			ft.	
	PERFORAT										ft Ero								
OOMEEN	, Elli OliAi																		
	GRAVEL PA	CK INT	ERVAL																
				From	۱	• • • • • • • • • • • • • • • • • • • •		π. το		•••••	π., ⊢rc	om			rt.	to		rt.	
6 GROU	JT MATERIA			at cement			ement (Bentonite									
Grout Inte						2	ft., Fron	n						om					
What is the nearest source of possible contamination:							7 Dit maions						estock pens			14 Abandoned water well			
1 Septic tank 4 Lateral lines							7 Pit privy 8 Sewage I						el storage rtilizer storage			15 Oil well/Gas well 16 Other (specify below)			
2 Sewer lines 5 Cess pool 3 Watertight sewer lines 6 Seepage pit						9 Feedyard			Ū	_			ecticide storage			Other (sp	ecity below	v)	
Direction f	-	51 111103	0 000	page pit			3	recaya	iu			nany fee		gc					
FROM	ТО			LITH	OLOGIC	LOG		-	FROM		0	iding ioo		PLU	GGING I	INTERVAL			
		1							0	4	-	Cin	1 OA	two C	_				
									415	57				vite		9			
									5.0	7.0				CHED					
									1.0	25:		0/19	EW!	SANI)				
	-									-									
							_			-		***							
														-					
7 CONTR	ACTOR'S C	OR LAN	DOWNI	R'S CER	TIFICAT	ION: TI	nis wate	er well v	vas (1) con	structed	. (2) re	econstru	cted.	or (3) pli	ugged	nder mv i	urisdiction	and was	
completed	on (mo/day/y	/ear)	3/	3//0	25					aı	nd this	record i	s true	to the be	st of my	knowledge	and belief	Kansas	
Water Well	Contractor's	Licenc									comple	eted on	(mo/da						
***	usiness nan											y (signa		40	RLY	Wir	les		
INSTRUC	TIONS: Use type	ewriter or b	all point p	en. <i>PLEASE</i>	PRESS FIR	RMLY and	<u>PRINT</u> cl	early. Plea	se fill in blanks,	, underline	or circle	the correct	t answei	rs. Send top	three op	es to Kansas	Department o	f Health	

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL SWINER and retain one to your records. Fee of \$5.00 for each <u>constructed</u> well.