		10/0	ATED MELL DE	CORR	Co \A/\A/(D.E. VOA.0	00 1010) No					
WATER WELL RE 1 LOCATION OF WATER WELL: Fraction			COND	Form WW0		2a-1212 ID ction Numbe	r Towns	hip Number	Rang	je Numb	er		
County: Thomas WW 1/4			· AW	1/4 NE	E 1/4	34	Т Т	9 s	R	32	1		
			town or city street				ty?						
												Ì	
2 WATER	WELL OWN	NER:		7	1								
_	ddress, Box	10		Clege	lmeier		Board of Agriculture, Division of Water Resource					lesources	
City, State, ZIP Code :				KS 76	KŠ 167701			Application Number: 20428					
3 LOCATE	WELL'S LO	CATION WITH	4 DEPTH OF	COMPLE	TED WELL.		ft. ELEV	ATION:					
AN "X" II	N SECTION	I ВОХ:	Depth(s) Grour	ndwater Ei	ncountered	1	f	t. 2		3		ft.	
- -	<u> </u>		WELL'S STATI	C WATER	LEVEL	ft. beld	w land surfa	ice measured o	n mo/day/yr				
Pump test data: Well water was											[
Est. Yieldgpm: Well water wasft. after hours pumping											- · ·		
Bore Hole Diameterin. toft., andin. toin. to											ft.		
[®] W 	<u>'</u>	; 		TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well									
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify be									cify belo	w)			
swse 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well													
↓			Was a chemica	l/bacteriolo	gical sample	submitted to De	partment? Ye	es No.	; If yes	, mo/day/yrs	sample	was sub-	
	S		mitted				Wat	ter Well Disinfe	ected? Yes		No		
5 TYPE O	F BLANK C	ASING USED:		5 Wroug			ete tile		G JOINTS: G				
1 Steel	1 Steel 3 RMP (SR)			6 Asbes	6 Asbestos-Cement 9 Other (spe			•		elded			
2 PVC					7 Fiberglass					readed			
			in. to										
Casing he	ight above l	and surface		in., weigh	t <i>.</i>		lbs	s./ft. Wall thick	ness or gauge	No			
TYPE OF	SCREEN C	OR PERFORAT	TION MATERIA			7 PV	-		Asbestos-c				
1 Steel 3 Stainless steel				•	glass		• •		1 Other (speci				
2 Brass 4 Galvanized steel SCREEN OR PERFORATION OPENINGS ARE:				6 Concr	6 Concrete tile 9 ABS				2 None used	,	. /		
	OR PERFO		:NINGS ARE: fill slot		5 Gauzed wrapped 6 Wire wrapped			8 Saw cut 9 Drilled h		11 None	e (open i	10le)	
*	ered shutte	-	Key punched		7 Torch cut				specify)			ft.	
			LS: From		ft. to .		ft Fro						
			From		ft. to .		ft., Fro	om	f	t. to		ft.	
	GRAVEL PA	ACK INTERVA	LS: From										
								om					
		_: 1 Neat o			nt grout			4 Other					
l			ft. to		t., From							- 1	
What is the nearest source of possible contamination				on:				· ·			Abandoned water well		
1 Septic tank 4 Lateral lines				7 Pit privy			el storage		15 Oil well/Gas well				
2 Sewer lines 5 Cess pool			8 Sewage lagoon				tilizer storage		16 Other (specify below)				
3 Watertight sewer lines 6 Seepage pit				9 Feedyard				ecticide storage	•				
	from well?					55014	7	nany feet?	DULICOINO	INITEDVAL			
FROM	ТО		LITHOLOGIC L	_OG		FROM	ТО		PLUGGING	INTERVAL	<u> </u>		
													
										····			
7 CONTR	ACTOR'S C	B LANDOWNE	ER'S CERTIFICA	ATION: Thi	s water well	was (1) cons	ructed, (2) re	econstructed, o	r (3) pluaged	under my iu	risdiction	and was	
											.	e	
	ousiness na							(signature)		2 1		420	
3,,30, 6,6	1005 Hal						-,	<u> </u>	MILIONO			שע	

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies skansa Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.