INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

				VATER WELL REC	CORD For	m WWC-5	KSA 82a-1	212 ID No. Pag		
	ON OF WATE		1				tion Number	1		Range Number
County:			NE		½ SW		2	Т 9	S	R 34 EW
Distance an	id direction fro	m nearest	town or city stree	et address of well	I if located w	ithin city?				
2 MATER	VA/ELL OVA/NE	o. Alvi	n D. Depe T	rustee for						
			us R. Depe I					Doord of Agricul	tura Dista	ion of Water Becoures
RK#, St. Ad	aress, Box #	474	2 County Po	i M, Coiby, K	(c 67701	1		•		ion of Water Resources
City, State,	ZIP Code WELL'S LOC	ATON W	THI	i Wi, Colby, r	(5 0110	***************************************		Application Num	iber: J	0123
3 AN "X" II	N SECTION B	OX:	" 4 DEPTH	OF COMPLETED	WELL	27	8 ft. ELEV	/ATION:		
	N		Depth(s) Gr	oundwater Encou	intered 1		ft	. 2	ft. 3	3ft.
ф Г	1		WELL'S ST	ATIC WATER LE	VEL 2	2 04 ft.	below land s	urface measured on	mo/day/y	r
	.1		I							ımping gpm
	NW	- NE								ımping gpm
€ w		1	E Bore Hole D	iameter 28	in to	27	8	ft. and	in.	to ft.
- · ·			WELL WAT	ER TO BE USED	AS: 5 PL	blic water s	upply	8 Air conditionir	ng 11	to ft. Injection well Other (Specify below)
<u> </u>	sw -	- SE								
	ı x	i	2 Irriga	ation 4 Industr	rial 7 La	wn and gard	den (domesti	c) 10 Monitoring w	vell	
†			Was a chem	nical/bacteriologic	al sample s	ubmitted to	Department?	Yes No X	If yes,	mo/day/yr sample was
	S		submitted				Wa	ter Well Disinfected?	Yes X	No
5 TYPE O	F BLANK CAS	SING USE	D:	5 Wroug	ht Iron	8 Concr	ete tile	CASING JOINT	S: Glued	X Clamped
1 Ste	eel	3 RM	IP (SR)	6 Asbest	tos-Cement					d
2 PV	С	4 AB	s	7 Fibergi	lass				Threa	ded
		16				in.	to	ft Dia	i	in. toft.
Casing beig	ht above land	surface	24	in weight	1	6.15	lbs./ft.	Wall thickness or ga	suae No.	.500
TYPE OF S	CREEN OR P	ERFORAT	ION MATERIAL	,g .:		7	PVC	Wall thickness or ga 10 Asbest	os-cemer	it
1 Ste	el	3 Sta	inless steel	5 Fibergi	lass	8	RMP (SR)	11 Other ((specify)	
2 Bra	iss	4 Ga	Ivanized steel	5 Fibergi 6 Concre	ete tile	9	ABS	12 None u	ısed (opei	n hole)
			NINGS ARE:		5 Gauze	d wrapped			1	11 None (open hole)
	ntinuous slot		3 Mill slot		6 Wire w	rapped		9 Drilled holes		
			4 Key punched	3	7 Torch	cut		10 Other (specify	")	
SCREEN-P	ERFORATED	INTERVA	LS: From	218	ft. to	2/8	ft. F	rom	ft. to	ft.
					ft. to			rom	ft. to	ft.
GR/	AVEL PACK I	NTERVAL	S: From	20	ft. to	278	ft. F	rom		ft.
			From		ft. to		ft. F	rom	ft. to	ft.
6 GROUT	MATERIAL:	1 Ne	at cement	2 Cement gro	out	3 Ben	itonite	4 Other		ft. to ft.
Grout Interv	als From	0	ft. to	20 ft. From	1	ft. 1	to	ft. From		ft. to ft.
What is the	nearest sourc	e of possit	ole contamination	1:			10 Lives	tock pens	14 Aba	ndoned water well
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/										
2 Sev	wer lines				B Sewage i	agoon		zer storage	16 Othe	
								none		
Direction fro		0000					How many			FEDVALO
FROM 253	70 257	CODE		HOLOGIC LOG	etrk	FROM	то	PLUG	GING IN	TERVALS
257	266			e med sand	JUK					
266	270		Gray shale	- mod Janu	***************************************	1				
			,							
~			 							
					····	 				
					w		1 1			
7 CONTRA	ACTOR'S OP	LANDOW	NER'S CERTIEI	CATION: This wa	ter well was	(1) construc	ted. (2) recon	structed or (3) plugg	ed under	my jurisdiction and was
_	on (mo/day/yr)			5-5-05	itor mon mas					e and belief. Kansas
				554		Thie W		ecord was completed	-	
	Contractor's L		W.	oofter Pump	& Wall I	I IIIS V		y (signature)		
	usiness name UCTIONS: Ple		anks and circle the	correct answers	Send three or	opies to Kans				eau of Water, 1000 S W
Jackson	n St., Ste. 420,	Topeka, Ka	nsas 66612-1367.	Telephone: 913-2	296-5545. Se	end one to W	ATER WELL	WNER and retain one	for your re	ecords. U