		R WELL RECORD F	orm WWC-					
LOCATION OF WATER WELL:		115		ction Number			Range Number	
County: SHERMAN		NE 14 SE		14	Т 9	S	R 40 EW)	
Distance and direction from neare	st town or city street a	ddress of well if located	within city?					
1 1.65	SONON POUL							
WATER WELL OWNER: VE	arnon incom	5						
IR#, St. Address, Box # : 923 ARCADE Sity, State, ZIP Code : GOODLAND KS 67735				Board of Agriculture, Division of Water Resources				
			i Kara		Application N			
LOCATE WELL'S LOCATION OF AN "X" IN SECTION BOX:	Depth(s) Ground	water Encountered 1		ft.	2	ft. 3.		
NW NE	Est. Yield	p test data: Well water	was was	ft. a ft. a	after	nours pum	pping gpm pping gpm to	
w	manufor Ir I				8 Air conditioning			
- i i *	(1) Domestic				9 Dewatering			
SW SE -	2 Irrigation							
	1 1			-			no/day/yr sample was sub-	
	mitted	basisinologisar sarripio sa			ater Well Disinfected?		No	
TYPE OF BLANK CASING US		5 Wrought iron	8 Conci	4			Clamped	
	MP (SR)	6 Asbestos-Cement		(specify belo			i	
2 PVC 4 AE				` .	•		led	
Blank casing diameter	=	•						
Casing height above land surface								
TYPE OF SCREEN OR PERFOR	<u> </u>		7 P\		10 Asbes			
	ainless steel	5 Fiberglass		MP (SR)				
	Ilvanized steel	6 Concrete tile	9 AE	, ,				
		A CONTRACTOR OF THE CONTRACTOR		55	12 None		•	
SCREEN OR PERFORATION OF	• •		wrapped		8 Saw cut		11 None (open hole)	
1 Continuous slot	3 Mill slot	6 Wire w	••		9 Drilled holes			
2 Louvered shutter	4 Key punched	7 Torch o						
SCREEN-PERFORATED INTERV								
GRAVEL PACK INTER					om	ft. to	ft. ft. ft.	
GROUT MATERIAL: (/) /4		2 Cement grout	3 Bent					
Grout Intervals: From		-						
What is the nearest source of po-		,					andoned water well	
1 Septic tank 4		7 Pit privy			storage			
·	Cess pool	8 Sewage lagoo			lizer storage		ner (specify below)	
3 Watertight sewer lines 6	•	9 Feedyard	•		cticide storage .		ioi (opeony belott)	
Direction from well?	ocopa go pii	o . oodya.a			any feet?			
FROM TO	LITHOLOGIC	LOG	FROM	TO TO		THOLOGI	CLOG	
DESCRI		HOW PLUGGE						
								
			bo Hom	5'	washed &	and		
			9 5'	3'	bentonite			
			3'	Top () G	round - diet			
				121 1	towns - Creek			
			<u> </u>	† -				
				1				
- 								
		A			· · · · · · · · · · · · · · · · · · ·			
····			1	1				
			1	-		**		
			 	-				
1 1			L			-		
CONTRACTOR'S OR LANDO								
completed on (mo/day/year)	13-1-88.			and this rec	ord is true to the best	of my kno	wijedge and belief. Kansas	
Water Well Contractor's License I	٧٥ ـِــِ	This Water We	li Record w	as completed	on (mo/day/yr) /	, L	/ <u>,.y</u>	
ander the business name of	B's Pamaxus	المحوكة لك		K by (signa	ature)	(A)	nth	
INSTRUCTIONS: Use typewriter or b	iall point pen. PLEASE PHE	SS FIRMLY and PRINT clearly	y. Please fill ir	blanks, underli	ne or circle the correct an	swers Send	top three copies to Kansas	
Department of Health and Environme	ent, Bureau of Water Protect	ction, Topeka, Kansas 66620-	7320, Telepho	one: 913-862-93	860. Send one to WATER	WELL OW	NEH and retain one for your	
records.								