WATER WELL RECORD	Form WWC-5	Division of Water Resources; App. No.
1 LOCATION OF WATER WELL: County: MITCHELL	Fraction NEW NEW NW/4	Section Number Township Number Range Number T S R 7 W E/W
Distance and direction from nearest town or ci	ty street address of well if	Global Positioning Systems (decimal degrees, min. of 4 digits)
located within city? South WEST Of		
X-ROAD AND VALORY LA	OR OAK WAY	Longitude:
2 WATER WELL OWNER: CHARLES RR#, St. Address, Box # : 3176 X	2041	Elevation:
Cit Cit Time Cit		Datum:
BITENAL	0, Ks 67418	Data Collection Method:
LOCATION		
WITH AN "X" IN Depth(s) Groundwater	Encountered (1)	ft. (2)
SECTION BOX: WELL'S STATIC WA	ATER LEVEL	ft. below land surface measured on mo/day/yr 011209
		ft. after hours pumping gpm hours pumping gpm
WELL WATER TO B		er supply 8 Air conditioning 11 Injection well
WELL WATER TO B	dlot 6 Oil field water	supply 9 Dewatering 12 Other (Specify below)
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well		
SWSE TY		D (1)
Was a chemical/bacteriological sample submitted to Department? Yes		
Sample was submitted		
5 TYPE OF CASING USED: 5 Wrought	Iron 8 Concrete til	e CASING JOINTS: GluedX Clamped
	Cement 9 Other (speci	
2 PVC 4 ABS 7 Fiberglass Threaded		
Blank casing diameter 5 in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 2.4 in., Weight I.60 lbs./ft. Wall thickness or guage No 5.04 24		
Casing height above land surface		
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)		
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)		
SCREEN OR PERFORATION OPENINGS ARE:		
1 Continuous slot 3 Mill slot, 025 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)		
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw cut 10 Other (specify)		
From. ft. to ft. From ft. to ft.		
From		
From ft. to ft., From ft. to ft.		
6 GROUT MATERIAL: 1 Neat cement 2	Cement grout 3 Bentonite	4 Other
		ft. to ft., From ft. to ft.
What is the nearest source of possible contaminat	ion:	
1 Septic tank 4 Lateral lines		estock pens 13 Insecticide storage 16 Other (specify
2 Sewer lines 5 Cess pool		storage 14 Abandoned water well below) ilizer storage 15 Oil well/gas well
3 Watertight sewer lines 6 Seepage pit Direction from well?		ilizer storage 15 Oil well/gas well any feet?
FROM TO LITHOLOGIC		
4 41 CLAY, TANKILT	- Y	
7 TOP SOIL BEE 4 41 CLAY, TANKILLT 41 55 CLAY, LIGHTGE 55 57 CLAY, BLACK 57 75 SANDSTONE, BLO	ay, Dalk Glay	
55 57 Chay, DLACK		
57 75 SANDSTONE, BLO	WIC, FINE GERIN	
	-	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged		
under my jurisdiction and was completed on (mo/day/year) 2		
under the business name of PESTINGED PUMP SERVICE by (signature)		
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., Sufte 420, Topeka, Kansas 66612-1367. Telephone		
785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html.		