WATER WELL RECOR		Form WWC-5		Division of Wate	r Resources App. No).	
1 LOCATION OF WATER County: Harvey	WELL: Fractio	"Se 1/4 Se/4	1/4 Se	ction Number	Township No.	Range Number R	
Street/Rural Address of Wel	l Location; if unknow	wn, distance & direction	on Glo		System (GPS) in	formation:	
from nearest town or intersec	ction: If at owner's	address, check here _				(in decimal degrees) (in decimal degrees)	
E. R.	od de l	Veletter	Ele	evation:			
E. Brodway Newton 2 WATER WELL OWNER: Carriepeon. Co.			nc_{l} $\frac{Da}{Co}$	tum: [_] WGS 8 llection Method:	4, □ NAD 83, □	NAD 27	
RR#. Street Address. Box #: LL/// L May All				GPS unit (Make/Model:)			
\(\int \chi\) \(\chi\) \(\chi							
3 LOCATE WELL WITH AN "X" IN 4 D		ETED WELL	WA				
SECTION BOX: Dept							
N WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr. 6.73							
EST. YIELD 13-22pm. Well water wasft. after							
W Bore Hole Diameter							
sw se Domestic Feedlot Oil field water supply Dewatering Other (Specify below							
☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well							
S If yes, mo/day/yr sample was submitted							
	er well disinfected?	marra section					
5 TYPE OF CASING USED: Steel PVC Other							
Casing diameter							
Casing height above land surface							
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)							
☐ Brass ☐ Galvanized Steel ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:							
Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole) Louvered shutter Key punched Wire wrapped Saw cut Other (specify)							
SCREEN-PERFORATED INTERVALS: From							
From							
From ft. to ft., From ft. to ft.							
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other							
What is the nearest source of possible contamination:							
Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below) Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well							
Watertight sewer lines , Seepage pit Feedyard Fertilizer storage Oil well/gas well							
Direction from well	LITHOLOGIC LOC					IGGING INTERVALS	
0 23 ye/10	WClay.	imixed S	hak				
33 65 Blue	Shale						
		- 10 /a/a	1-2n				
65 66 Crum		aler Wa	<i>LC.1</i>				
66 40 Gray	Shale						
	MANAGE TO THE TAX TO T						
7 CONTRACTOR'S OR LA	NDOWNER'S CE	RTIFICATION: This	s water w	ell was Z eonst	ructed, \square reconstr	ructed, or plugged	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year)							
under the business name of							
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRML</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) 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	copy to WATER WEI	LL OWNER and retain on	e for your	records. Include for	ee of \$5.00 for each	constructed well. Visit us at	
http://www.kdheks.gov/waterwell/inde KSA 82a-1212							