| SCREEN-PERFORATED INTERVALS: From 103 ft. to 113 ft., From ft. to ft. to ft. GRAVEL PACK INTERVALS: From 63 ft. to 117 ft., From ft. to ft. | | WATER V | VELL RECOF | RD Form WV | VC-5 KSA | 82a-1212 I | | | - | | |
|--|---|---------------------------|---------------------|---------------------|---------------------|-----------------|---------------------------------------|---------------------|---------------------------------------|-----------------|--|
| Distance and direction from nearest town or day street actions of read Approximately 12 cmile each and 12 cmile each of McPhorono 2] WATER WELL CONNER! Siques Beds GMD 92 B | LOCATION OF V | VATER WELL: Fr | action | | Se | ection Numb | er Township N | umber F | - | $\overline{}$ | |
| Approximately 1.12 mile south and 1.12 miles east of McPimerson 2 MATER WELL WOMER Supple Set SMD 1/2 SRR ST. Address, Box F = 313 Spruse Application Number | | | | | | | т 20 | S R | 3 E | : (w) | |
| 2 WATER WELL OWNER Sepure Basis GMD #2 RRAS, SL Address, Dec # 318 SUNCE RRAS, SL Address, Dec # 318 SUNCE RRAS, SL Address, Dec # 318 SUNCE RRAS, SL ADDRESS DEC # 318 SUNCE RRA | Distance and direct | ion from nearest town or | city street ad | dress of well if I | ocated within c | ity? | | | | | |
| STYPE OF BLANK CASING USED Strong and path above land authors 2 (plate) Type OF SCREEN OR PERFORATION MATERIAL: Steam of advanced side Type OF SCREEN OR PERFORATION MATERIAL: Steam of a Summary of the strong | Approximately 1 1 | /2 mile south and 1 1/2 n | niles east of M | lcPherson | | | | | | | |
| STYPE OF BLANK CASING USED Strong and path above land authors 2 (plate) Type OF SCREEN OR PERFORATION MATERIAL: Steam of advanced side Type OF SCREEN OR PERFORATION MATERIAL: Steam of a Summary of the strong | 2 WATER WELL C | WNER: Fallus Beds GM | D #2 | | | | | | | | |
| City, Silect, ZIP Code Haistead, KS 67056-1925 Application Number: AL INCATE MEDIA INCOMENS Depthics) Groundwater Encountered 1 1.5 ELEVATION: Inthinomon 1.5 1.5 ELEVATION: Inthinomon 1.5 1.5 ELEVATION: Inthinomon 1.5 | RR#, St. Address, E | Box # :313 Spruce | <i>5 112</i> | | | | Board of Ag | riculture, Divisior | n of Water Re | sources | |
| AN Y'N SECTION BOX Depth(s) Groundwate Recountered 1. ft. 3 i.l. | City, State, ZIP Cod | e Halstead, KS 67 | | | | | Application I | Number: | * | | |
| AN Y'N SECTION BOX Depth(s) Groundwate Recountered 1. ft. 3 i.l. | 3 LOCATE WELL'S | LOCATION WITH 4 DI | EPTH OF CO | MPLETED WELL | - 116 | ft. ELE | VATION: unknown | | | | |
| WELLS STATIC WATER LEVEL. 7.6.8. If, below land surface measured on mixingly 1.20:05 Pump test data: Well water was not charged ft., after hours pumping gem Boar Hotel Diameter 9. in 10 119 I. and n. in 10 1.0 .ft. Well water Water State was not charged ft., after hours pumping gem Boar Hotel Diameter 9. in 10 119 I. and n. in 10 0. ft. Well water Water State was not charged ft., after hours pumping gem Boar Hotel Diameter 9. in 10 119 I. Demesto 3 Feedlot 8 Olf field water supply 8 Deventering 12 Other (peedly below) 2 Integration 4 Industrial 7 Demesto (time 8 parton) 1 Worker Well Diameter 12 Test 11 Ingecton woll was a conceived a supple submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes No. V. If yes, moridaryly's sample was submitted to Department? Yes | | | | | . 1 4 | | | | | . ft. | |
| Furmy least data: Well water was _Not checked_ it. after | <u> </u> | N i ' | ` ' | | | | | /day/yr 1-20-05 | | ' ' ' ' ' | |
| Earl y riset du unincom, gamm. Well water was u. after hours pumping gam gamm. Well water was u. t. after hours pumping gamm. Well water sus u. t. after hours pumping gamm. Well water supply and gamm. In to It. well water supply and gamm. In to It It |] | | | | | | | | | apm | |
| Bore Note Dismeter. 9. In. to | NW | NE Fst Y | | | | | | | | | |
| Superior | | Bore | Hole Diamete | , 6 in | to 1 | 19 _f | t and | in to | 9 | ft | |
| 1 Domestic 3 Feedlod 6 Oil field water supply 9 Develetring 12 Other (specify below) 2 I ringstor 4 Inclusives 7 Domestic (tumn & garden) (m) Microbiority well was a chemical sharptone of the programment | \(\frac{1}{2}\) \(\frac{1}{2}\) | FI | | | | | | | | | |
| 2 Infigation 4 Industrial 7 Domestic (lawn 8 gardon) (1) Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes No V If yes, mor/day/yrs sample was submitted to Department? Yes No V If yes, mor/day/yrs sample was submitted to Department? Yes No V If yes, mor/day/yrs sample was submitted to Department? Yes No V If yes, mor/day/yrs sample was submitted to Department? Yes No V If yes, mor/day/yrs sample was submitted to Department? Yes No V If yes, mor/day/yrs sample was submitted to Department? Yes No V If yes, mor/day/yrs sample was submitted to Department? Yes No V If yes, mor/day/yrs sample was submitted to Department? Yes No V If yes, mor/day/yrs sample was submitted to Department? Yes No V If yes, mor/day/yrs sample was submitted to Department? Yes No V If yes, mor/day/yrs sample was submitted to Department? Yes No V If yes Norday/yrs sample was submitted to Department? Yes No V If yes Norday/yrs sample was submitted to Department? Yes No V If yes Norday/yrs sample was submitted to Department? Yes Norday/yrs sample was submitted to Department of Depart | | | | | | | _ | • | | | |
| Was chemical/bactenological sample submitted to Department? Yes | sw | SE | | | | | _ | 12 Otr | ner (specify belo | iw) | |
| STYPE OF BLANK CASING USES: 5 | | 1 1 1 | • | | | | | | | | |
| Steel Stee | <u>'</u> | Was a | chemical/bact | teriological sample | e submitted to D | epartment? \ | YesNo √ | If yes, mo/day/ | /yrs sample w | as sub | |
| Steal 3 RMP (SR) 6 Abbestos-Cemant 9 Office (specify below) Wedded 1 | | | t | | | | ater Well Disinfected | ? Yes | No | | |
| Picco A ABS 7 Fiborglass Threaded Very In to 103 ft. Dia In to 6 | — _ | CASING USED: | 5 | Wrought iron | = | | | INTS: Glued | Clamped | | |
| Blank casing diameter 2 (stee) in. to 7 | _ | , , | 6 | Asbestos-Cement | 9 Other | (specify below | v) | | | | |
| Casing height above land surface 36 in, weight 3.85 (sleel) 70 (PVC) bs./ff. Well thickness or gauge No. 154 (sleel) .154 (PVC) | (2) PVC | 4 ABS | 7 | Fiberglass | | | | Threaded | ····· V ····· | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: 1 1 1 1 1 1 1 1 1 | Blank casing diame | eter 2 (steel) in. | to 7 | ft., Dia | 2 (PVC) | in. to | 103 ft., Dia | in. | to | . fi | |
| 1 Steel 3 Stainless ateal 5 Fiberglass 8 RMP (SR) 11 Other (speachty) | Casing height abov | re land surface 36 | 3 in., [,] | weight 3.6 | 5 (steel) .70 (F | VC) I | bs./ft. Wall thickness | or gauge No .154 | (steel) .154 | (PVC) | |
| 1 Steel 3 Stainless ateal 5 Fiberglass 8 RMP (SR) 11 Other (speachty) | TYPE OF SCREE | N OR PERFORATION N | MATERIAL: | | 7) PVC | | 10 Asb | estos-cement | | | |
| 2 Brass | 1 Steel | 3 Stainless steel | 5 | Fiberglass | _ | (SR) | 11 Othe | er (specify) | | | |
| SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole) | 2 Brass | 4 Galvanized steel | | - | | ` , | | | | | |
| 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter Key punched 7 Torch cut 10 Other (specify) ft. 2 Courtered shutter Key punched 7 Torch cut 10 Other (specify) ft. 3 Continuous slot 2 Coment grout 10 Torch cut 11 Torch cut | SCREEN OR PER | | | _ | | | _ | | | | |
| 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) ft. SCREEN-PERFORATED INTERVALS: From 103 ft. to 113 ft., From ft. to 1.0 ft. From ft. to 177 ft., From ft. to 1.0 ft. GRAVEL PACK INTERVALS: From 63 ft. to 117 ft., From ft. to 1.0 ft. From ft. to 117 ft., From ft. to 1.0 ft. From ft. to 117 ft., From ft. to 1.0 ft. From ft. to 117 ft., From ft. to 1.0 ft. From ft. to 117 ft., From ft. to 1.0 ft. From ft. to 117 ft., From ft. to 1.0 ft. From ft. to 117 ft., From ft. to 1.0 ft. From 1.0 ft. From 53 ft. to 63 ft. What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well 1 Septic tank 4 Lateral lines 7 Pil privy 11 Fuel storage 15 Other (specify below) 3 Waterlight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage None known Direction from well? FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 4 Topsoil 4 6 Clay, dark brown, hard 11 85 Clay, brown, hard 113 Sand and gravel, coarse to fine, clean 113 Sand and gravel, coarse to fine, clean 113 Sand and gravel, coarse to fine, clean 117 119 Shale, blue, hard 117 119 Shale, blue, hard 118 This Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/y)ear) 1-20-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/y)ear) 1-24-05 Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/y)ear 1-24-05 Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/y)ear 1-24-05 Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/y)ear 1-24-05 Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/y)ear 1-24-05 Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/y)ear 1-24-05 Water W | | _ | | | | | | | (| | |
| SCREENPERFORATED INTERVALS | | _ | | | • • | | | , | | ft. | |
| From ft. to ft., From ft. to ft. | | | | | | ft Fr | | ft. to | | ft. | |
| GRAVEL PACK INTERVALS: From 63 ft. to 117 ft., From ft. to ft. From ft. to ft. ft. from ft. to ft. From ft. to ft. ft. from ft. to ft. From ft. to ft. ft. from ft. to ft. From ft. to ft. ft. from ft. to ft. From ft. to ft. ft. from ft. From ft. to ft. from ft. ft. from ft. From ft. to ft. From ft. From ft. to ft. From ft. Fr | | | ·om | ft to | i-i-ī | ft Fr | | ft to | | | |
| From ft. to ft., From ft., | GRAV | | | | | | | | | ft. | |
| Grout Intervals: From 0 ft. to 53 ft., From ft. to ft., From 53 ft. to 63 ft. What is the nearest source of possible contamination: 10 Livastock pens 14 Abandoned water well 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage Direction from well? How many feet? FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 4 Topsoil 4 6 Clay, dark gray 6 111 Clay, dark brown, hard 11 11 85 Clay, brown, hard 11 11 85 Clay, brown, hard 85 113 Sand and gravel, coarse to fine, clean 113 117 Shale, red, hard 117 119 Shale, red, hard 117 119 Shale, blue, hard 117 119 Shale, red, hard 117 119 Shale, red, hard 118 Town of the business name of Clarke Well & Equipment, Inc. NSTRUCTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed on (mo/day/year) 1-20-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/year) 1-24-05 NSTRUCTOR'S Use typewriter or hall point pen. PLEASE PRESS PRIMITy and PRIMIT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and | | Fr | om | ft. to | | ft., Fr | om | ft to | | ft. | |
| Grout Intervals: From 0 ft. to 53 ft., From ft. to 10 Livestock pens 14 Abandoned water well 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage None known Direction from well? FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 4 Topsoil 4 6 Clay, dark gray 6 11 Clay, dark brown, hard 11 85 Clay, brown, hard 11 85 Clay, brown, hard 11 85 Clay, brown, hard 113 Sand and gravel, coarse to fine, clean 113 117 Shale, red, hard 117 119 Shale, blue, hard 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed (3) plugged under my jurisdiction and was and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/yra) 1-20-05 Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/yr) 1-24-05 NSTRUCTIONS: Use lypewriter or ball point pan PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and | 6 GROUT MATE | DIAL: AND NOTE OF | 2. 0 | t 0 D | 4 :4 - | | 4 Other Destable | | | | |
| What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage None known How many feet? FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 4 Topsoil 4 6 Clay, dark gray 6 11 Clay, dark brown, hard 111 85 Clay, brown, hard 111 85 Clay, brown, hard 85 113 Sand and gravel, coarse to fine, clean 113 117 Shale, red, hard 117 Shale, blue, hard 117 Shale, blue, hard 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed or (3) pluged under my jurisdiction and was and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/year) Nature Well Contractor's License No 185 This Water Well Record was completed on (mo/day/year) NSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct enswers. Send top three copies to Kansas Department of Health and | H GROOT MATE | Neat cement | 2 Cement | grout 3 Ben | tonite | | 4 Other Bentonite H | olepiug | | | |
| What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 11 Full storage 11 Full storage 12 Sewer lines 5 Cass pool 8 Sewage lagoon 12 Fertilizer storage 13 Insecticide storage None known Direction from well? FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 4 Topsoil 4 6 Clay, dark gray 6 11 Clay, dark brown, hard 11 85 Clay, brown, hard 11 85 Clay, brown, hard 85 113 Sand and gravel, coarse to fine, clean 117 119 Shale, blue, hard 117 119 Shale, blue, hard 117 This water well was (1) constructed (2) reconstructed or (3) pluged under my jurisdiction and was and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/year) Native Well Contractor's License No 185 This Water Well Record was completed on (mo/day/year) Native Well Contractor's License No 185 This Water Well Record was completed on (mo/day/year) Native Well Contractor's License No 185 This Water Well Record was completed on (mo/day/year) Native Well Contractor's License No 185 This Water Well Record was completed on (mo/day/year) Native Well Contractor's License No 185 This Water Well Record was completed on (mo/day/year) Native Well Contractor's License No 185 This Water Well Record was completed on (mo/day/year) Native Completed on (mo/day/year) Native Well Contractor's License No 185 This Water Well Record was completed on (mo/day/year) Native Well Contractor's License No 185 This Water Well Record was completed on (mo/day/year) Native Well Contractor's License No 185 This Water Well Record was completed on (mo/day/year) Native Well Contractor's License No 185 This Water Well Record was completed on (mo/day/year) Native Well Contractor's License No 185 Water Well Contractor's License N | Grout Intervals: F | rom () ft. t | o 53 | ft., From | f | t. to | ft., From | 53 ft. to | o 63 | ft. | |
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| Direction from well? FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 4 Topsoil 4 6 Clay, dark gray 6 11 Clay, dark brown, hard 11 85 Clay, brown, hard 85 113 Sand and gravel, coarse to fine, clean 113 117 Shale, red, hard 117 119 Shale, blue, hard 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed or (3) plugged under my jurisdiction and was completed on (mo/day/year) 1-20-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/yr) 1-24-05 under the business name of Clarke Well & Equipment, Inc. INSTRUCTIONS: Use lypewriter or ball point pen PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and | 2 Sewer lines | 5 Cess | pool | 8 Sewage | e lagoon | 12 Fertilizer | storage | 16 Other (sp | ecify below) | | |
| FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 4 Topsoil 4 6 Clay, dark gray 6 11 Clay, dark brown, hard 11 85 Clay, brown, hard 85 113 Sand and gravel, coarse to fine, clean 113 117 Shale, red, hard 117 119 Shale, blue, hard 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 10 completed on (mo/day/year) 1-20-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/yr) 1-24-05 under the business name of Clarke Well & Equipment, Inc. 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 to Kansas Department of Health and | 3 Watertight sew | er lines 6 Seepa | ige pit | 9 Feedya | ırd | 13 Insecticid | le storage None | known | | | |
| FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 4 Topsoil 4 6 Clay, dark gray 6 11 Clay, dark brown, hard 11 85 Clay, brown, hard 85 113 Sand and gravel, coarse to fine, clean 113 117 Shale, red, hard 117 119 Shale, blue, hard 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 10 completed on (mo/day/year) 1-20-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/yr) 1-24-05 under the business name of Clarke Well & Equipment, Inc. 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 to Kansas Department of Health and | Direction from well? | | | | | How m | any feet? | | | | |
| 0 4 Topsoil 4 6 Clay, dark gray 6 11 Clay, dark brown, hard 11 85 Clay, brown, hard 85 113 Sand and gravel, coarse to fine, clean 113 117 Shale, red, hard 119 Shale, blue, hard 110 Shale, blue, hard 110 Shale, blue, hard 1110 Shale, blue, hard 1111 Sha | —————————————————————————————————————— | LITHO | 10010100 | | FROM | | | CCINC INTERV | /ALS | | |
| 4 6 Clay, dark gray 6 11 Clay, dark brown, hard 11 85 Clay, brown, hard 85 113 Sand and gravel, coarse to fine, clean 113 117 Shale, red, hard 119 Shale, blue, hard 27 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) 1-20-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/yr) 1-24-05 under the business name of Clarke Well & Equipment, Inc. 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 to Kansas Department of Health and | | | LOGIC LOG | | FROM | 10 | PLU | GGING INTERV | ALS | - | |
| 6 11 Clay, dark brown, hard 11 85 Clay, brown, hard 85 113 Sand and gravel, coarse to fine, clean 113 117 Shale, red, hard 119 Shale, blue, hard 117 119 Shale, blue, hard 117 119 Shale, blue, hard 118 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) 1-20-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/yr) 1-24-05 by (signature) 1NSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly, Please fill in blanks, underfine or circle the correct answers. Send top three copies to Kansas Department of Health and | | | | | | 1 | | | | | |
| 111 85 Clay, brown, hard 85 113 Sand and gravel, coarse to fine, clean 113 117 Shale, red, hard 119 Shale, blue, hard 119 Shale, blue, hard CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 1) constructed or (3) plugged under my jurisdiction and was completed on (mo/day/year) 1-20-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/yr) 1-24-05 under the business name of Clarke Well & Equipment, Inc. 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 to Kansas Department of Health and | | 7, | | | | | | | | | |
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| 113 117 Shale, red, hard 119 Shale, blue, hard 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) 1-20-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/yr) 1-24-05 under the business name of Clarke Well & Equipment, Inc. 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 to Kansas Department of Health and | | | | | | 1 | | | · · · · · · · · · · · · · · · · · · · | | |
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