			WATER WELL REC	ORD Form WWC-5	KSA 82a-	1212 ID No)	
LOCATION OF WATER WELL: Fraction County: Harvey NW 1/4			1/// 1/F	I	tion Number	Township Number	Range Number	
				NW 1/4 NE 1/4		روو	T & S	R (EM
olola 100 al	ia airootioi	/mi		of Newto		4019 5	in 24th	
WATER	WELL O	<u> </u>	eff couc	hman				
RR#, St. Ad City, State,	ZIP Code	: 2	Adams P Halstead	KS 67056			Board of Agriculture, Division of Water Resources Application Number:	
			H 4 DEPTH OF C	OMPLETED WELL	5 0	ft. ELEVAT	TION:	
AN "X" IN	I SECTIOI N		Depth(s) Ground	dwater Encountered		ft.	2 f	1.3 ft.
w	-NW 	NE	Est. Yield	np test data: Well water 2 gpm: Well water FO BE USED AS: 5 F 3 Feedlot 6 C 4 Industrial 7 E	was was Public water so oil field water oomestic (law	ft. a ft. a supply supply vn & garden)	ifter	s pumping
	-SW	Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs sa mitted Water Well Disinfected?						
TYPE	OF BLANK	CASING USE	 D:	5 Wrought iron	8 Concre	ete tile	CASING JOINTS: G	lued Clamped
Steel 3 RMP (SR) CPVC 4 ABS			(SR)	6 Asbestos-Cement 9 Other (specify 7 Fiberglass			<u> </u>	/eldedhreaded
Blank casing diameter								
Casing hei	ght above	land surface	30	in., weight			lbs./ft. Wall thickness or g	uage No/6 o
			TION MATERIAL:	5 Fiberalese			10 Asbestos-C	
1 Stee 2 Bras			less Steel Inized Steel	5 Fiberglass 6 Concrete tile			11 Other (Specify)	
		DRATION OPE	NINGS ARE:		_		8 Saw cut	None (open hole)
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes								
	ered shut	ter 4 TED INTERVA	Key punched LS: From	7 Torch				. toft.
		ACK INTERVA	From	2.3 ft. to	39	ft., From ft., From ft., From	ft	. to
S∐ GROU Grout Inter	T MATER	IAL: 1 N nm - 3	leat cement	2 Cement grout	Bent	onite 4	Other	ft. toft.
			ble contamination:		It., FromIt. to			4 Abandoned water well
1 Septic tank 4 Lateral lines				7 Pit privy		11 Fuel storage		5 Oil well/Gas well
2 Sewer lines 5 Cess pool			ess pool	Sewage lagoon		12 Fertilizer storage		6 Other (specify below)
3 Watertight sewer lines 6 Seepage pit				9 Feedyard			icide storage	
Direction from well? NE How many feet? /50							NINTERNAL O	
FROM	TO 7	D	LITHOLOGIC	LOG	FROM	ТО	PLUGGING	INTERVALS
23	23 35	Dr X	or clay	Cr. co.			• • • • • • • • • • • • • • • • • • • •	
35	50	Shale	>	Sand			* * * *	
								# V
7 00:	. OTC 7:-	00 11:50	NEDIO 05					
completed of	on (mo/day Contracto	//year) r's Licence No	4-2-03	This Water		and this red was completed	ord is true to the best of m	under my jurisdiction and was y knowledge and belief. Kansas - 2 3
INISTRIC	TIONS: Use to			RMI V and PRINT clearly Please	fill in blanks use	forling or pirals the	correct answers Cotton throng	wing to Kongas Department of Lincoln

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PMINT</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Healt and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 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 <u>constructed</u> well.