			R WELL RECORD	Form WWC-5				
LOCATION OF		Fraction	1/		tion Number	Township Nu		Range Number
County: Har Distance and dire	per ction from nearest town	n or city street ac	NW 1/4 ddress of well if locate	SE ¼ Led within city?	6	J T 32	S	R 6 W EAW
918 E.		•	Harp		c			i
	OWNER: Don Ho		1191	CI, Namsa				AN AND THE PROPERTY OF THE PRO
	s, Box # : 918 E.					Board of Ad	riculture, (Division of Water Resources
City, State, ZIP C						•		
	'S LOCATION WITH 4 CTION BOX:	DEPTH OF Co	OMPLETED WELL water Encountered	. 60 1 26.	ft. ELEVA	TION:	ft. 3	
Wie Z	NE I	Pump Est. Yield Bore Hole Diame	test data: Well wat	ter was ter was	ft. at	fter	hours pur	.5-6-83
. i		1 Domestic	3 Feedlot			-		Other (Specify below)
sw	SE		4 Industrial	7 Lawn and g	arden only 1	0 Observation well	٠	mo/day/yr sample was sub-
<u> </u>		mitted				ter Well Disinfected		
TYPE OF BLA	NK CASING USED:		5 Wrought iron	8 Concre	ete tile	CASING JOIN	ITS: Glued	X Clamped
1 Steel	3 RMP (SR))	6 Asbestos-Cement	9 Other	(specify below	v)	Welde	ed
2 PVC	_4 ABS		7 Fiberglass	Cer-	Mac styre	ene SDR-26	Threa	ded
								n. to ft.
Casing height abo	ove land surface	1.1	in., weight	.•.59	ibs./	ft. Wall thickness o	r gauge No	203
TYPE OF SCREE	EN OR PERFORATION	MATERIAL:		7 PV	С	10 Asbe	stos-ceme	nt
1 Steel	3 Stainless	steel	5 Fiberglass	8 <u>RM</u>	IP (SR)			
2 Brass	4 Galvanize	ed steel	6 Concrete tile	9 AB	_		used (op	en hole)
SCREEN OR PER	RFORATION OPENING	SS ARE:		zed wrapped		8 Saw cut		11 None (open hole)
1 Continuous slot 3 Mill slot 6 Wire with						9 Drilled holes		
2 Louvered	shutter 4 Key	y punched	7 Torc	h cut		10 Other (specify)		
	RATED INTERVALS:	From	ft. to .	60	ft., Fror	n	ft. to)
		From						
_	RIAL: 1 Neat ce	ement 2	2 Cement grout					
Grout Intervals:	From4f	t. to <u>1</u> 4	ft., From	<i></i> ft.	to	ft., From		. ft. to
What is the neare	est source of possible c	contamination:			10 Livest	tock pens	14 AI	pandoned water well
1 Septic tan	ı <u>k</u> 4 Lateral	l lines	7 Pit privy	y 11 Fuels		storage	15 O	l well/Gas well
2 Sewer lines 5 Cess pool			8 Sewage lag	8 Sewage lagoon 12 Fe		zer storage	16 O	ther (specify below)
	Northwest				How man			
FROM TO	<u>' </u>	LITHOLOGIC L	_OG	FROM	то	L	ITHOLOG	IC LOG
0 3	Topsoil							
3 3								
31 50								
56 6	0 Red Shal	e						

						1 10 1 10 10 10 10 10 10 10 10 10 10 10		
completed on (mo Water Well Contra	R'S OR LANDOWNER' o/day/year)5-6-8; actor's License No as name of Harp Wo	3	This Water \	Well Record wa	and this reco	rd is true to the bes on (mo/day/yr)	t of my kno	er my jurisdiction and was owledge and belief. Kansas 35-35-35
INSTRUCTIONS:	Use typewriter or ball po	oint pen, <i>PLEASE</i>	E <i>PRESS FIRMLY</i> a	nd <i>PRINT</i> clearl	y. Please fill ir	blanks, underline o		correct answers. Send top
three copies to Ka	nsas Department of Hea	alth and Environm						Send one to WATER WELL
OWNER and reta	in one for your records	j				,		