		WATER WE	LL RECORD	Form WWC-5				Description 1			
LOCATION OF WA		Fraction			tion Number	Township Number	_	Range Number			
County: Harper		SE 1/4	SE 1/4	SE 1/4	23	Т 33	S	R 7 W E	E/W		
	from nearest town o	or city street address	s of well if locate	a within city?							
800 W. Main											
WATER WELL OV		ld Corporati	Lon			Board of Agricu	iltura Divis	sion of Water Res	SOURCE		
	IR#, St. Address, Box # : 800 West Main Sity, State, ZIP Code Anthony, Kansas, 67003					Board of Agriculture, Division of Water Resources Application Number:					
City, State, ZIP Code											
LOCATE WELL'S L AN "X" IN SECTIO	OCATION WITH 4	DEPTH OF COMPL	ETED WELL		ft. ELEVA	TION:	4 0		 4		
,	N De					2					
1						face measured on mo					
NW	NE					fter ho		-			
1 1						fter ho					
w 1						and			π.		
<u> </u>		ELL WATER TO BE		5 Public water		- · · · · · · · · · · · · · · · · · · ·	· ·	ection well			
sw	SE	1 Domestic		6 Oil field wa		9 Dewatering	\sim	er (Specify below			
		2 Irrigation			-	10 Monitoring well		•			
			iological sample :	submitted to D	•	esNo	•		as sub-		
		ted				ter Well Disinfected?		No			
TYPE OF BLANK			rought iron		ete tile			•			
1 Steel	3 RMP (SR)		sbestos-Cement		` '	,					
2 PVC	4 ABS		berglass				Inreaded	1			
						ft., Dia					
			veight			ft. Wall thickness or ga	-				
TYPE OF SCREEN C				7 PV	_	10 Asbesto		1/1			
1 Steel	3 Stainless ste		berglass		IP (SR)	11 Other (s					
2 Brass	4 Galvanized		oncrete tile	9 AB		12 None us		,			
SCREEN OR PERFO				ed wrapped			11	None (open hole	e)		
1 Continuous sk				wrapped		9 Drilled holes	1/	4			
2 Louvered shut		1 //	1 7 Torch	4		10 Other (specify)	₃ /V	<i>(</i> #:			
SCREEN-PERFORAT	ED INTERVALS:	From				m					
GRAVEL BA	CK INTERVALS:					n					
GRAVEL PA	ICK INTERVALS:	From				n					
GROUT MATERIAL	.: 1 Neat cem			0.00-4-			ft. to		ft.		
		to C	ment grout	3 Bento	nite 4	Other Clay .C.C.	man j				
What is the nearest so	ource of possible con	tamination:	i., From	π.							
1 Septic tank	4 Lateral li		7 Dit aritis		10 Livestock pens		14 Abandoned water well				
2 Sewer lines	5 Cess poo	_	7 Pit privy		_		15 Oil well/Gas well				
	ver lines 6 Seepage		8 Sewage lagoon			zer storage	16 Other (specify below)		,		
Direction from well?	· -	ρit	9 Feedyard			icide storage					
FROM TO	North	ITHOLOGIC LOG		FROM	How mar TO		ING INTE	DVALC			
	#3 Soil Bor			20							
0 .5'		el/brown silt	-	20	-0-	Original ma	terial				
.5' 1.5'		silty loam									
1.5' 8'	Redish brown	-									
8' 10'	l e										
	Redish brown	•									
10' 15' 15' 17'	Redish brown	•									
4	Redish brown										
17' 20'	Redish brown	coarse sand	1			O 000000000000000000000000000000000000					
				-							
T				_							
CONTRACTOR'S	OR LANDOWNER'S	CERTIFICATION: T	his water well wa	as Construc	cted, (2) recor	structed, or (3) plugge	ed under n	ny jurisdiction and	d was		
completed on (mo/day/	(year) 4 / 2:1./	.94			and this recor	d is true to the best of	my knowle	dge and belief. K	ansas		
Vater Well Contractor	s License No	.576	. This Water W	ell Record was	s completed o	n (mo/day/yr) 5./.	11/94				
inder the business na		Environmenta						ett			
INSTRUCTIONS: Use ty	pewriter or ball point pen. I	PLEASE PRESS FIRMLY a	nd PRINT clearly. Plea	ase fill in blanks i	nderline or circle	the correct answers. Sand to	- threei-	s to Kansas Departmen	ot		
of Health and Environm	ent, Bureau of Water, Tope	ka, Kansas 66620-0001.	elephone: 913-296-55	545. Send one to	WATER WELL OW	NER and retain one for your	records.	5	1 11		