		WA	TER WELL REC	CORD Form WWC-5	KSA 82a-	1212 ID No		
	ION OF WAT		Fraction	11.1	Sec	tion Number	Township Number	Range Number
County:	Clark		1 3 E 1/4		1/4	10	T 34 S	R 23 EW
Distance ar	nd direction f	rom nearest tov	wn or city street	address of well if located	within city?	IO N OI	Englewood at	The occ nwy
293&16	50, 5E	on 160,	6 S on	Co. Rd. 3.3	e on co	. Ka. t	o Gate on S sid	-2nd well
	WELL OW	Mid	co Exbro	ration Inc. rive Suite 2	0.4			*
City, State,	ddress, Box			1. 60559	04			Division of Water Resources 3004 0342
3 LOCATE	WELLICIO	CATION WITH	4 DEPTH OF	COMPLETED WELL	8.0	ft. ELEVAT	TION:	nur onth
	NELL'S LO NSECTION I			indwater Encountered	1 7	ft	2 ft. 3	sft.
7.11.71	N		WELL'S STAT	IC WATER LEVEL	.7ft. belo	w land surface	e measured on mo/day/yr	10-27-04
	X		Pu	imp test data: Well water	er was		ifter hours p	pumping gpm
	-Nw -	- NE			er was Public water s		fter hours p 8 Air conditioning 11 li	njection well
	!	!	1 Domestic	c 3 Feedlot 6	il field water	supply	9 Dewatering 12 (Other (Specify below)
w		E	2 Irrigation	4 Industrial 7	Domestic (law	n & garden)	10 Monitoring well	
	1	1						
	-SW -	- SE		al/bacteriological sample	submitted to I		es NoX; If yes, r	
	1	i	mitted			Wa	ater Well Disinfected? Yes	X No
	S							
TYPE OF BLANK CASING USED:				5 Wrought iron	8 Concre			ed
1 Steel 3 RMP (SR) 2 PVC 4 ABS			H)	6 Asbestos-Cement 7 Fiberglass	9 Other (specify below)			dedeaded
Blank casing diameter5in. to			in. to					
Casing hei	ght above la	nd surface	2.4	in., weight3.•.6	04		lbs./ft. Wall thickness or gua	ge No.SDR 21.316
TYPE OF	SCREEN OF	R PERFORATIO	N MATERIAL:		(7)PV	С	10 Asbestos-Cer	nent
1 Steel 3 Stainless Steel			•		IP (SR)	` '	/)	
2 Bras		4 Galvania		6 Concrete tile	9 AB	5	12 None used (o	,
		RATION OPENII			zed wrapped wrapped		8 Saw cut 9 Drilled holes	11 None (open hole)
	tinuous slot vered shutte		Mill slot (ey punched	7 Tord			10 Other (specify)	ft.
		D INTERVALS	• •	40 # to	80	ft From	ft. to	
SCHEEN-	ENFORATI	EDINTERVALS					ft. to	
(GRAVEL PAG	CK INTERVALS	6: From	20 ft. to	80	ft., From	ft. to	o ft.
			From	ft. to		ft., From	ft. to)tt.
6 GROU	JT MATERIA	L: 1 Nea	it cement	2 Cement grout	3 Bent	onite (Other hole pl	Lug
Grout Inter	vals: Fron			9	ft. t		ft., From	
What is the	e nearest so	urce of possible	contamination:			10 Livest		Abandoned water well
1 Septic tank 4 Lateral lines			ral lines	7 Pit privy		11 Fuels		Oil well/Gas well
2 Sewer lines 5 Cess pool				8 Sewage lagoon			•	Other (specify below)
3 Watertight sewer lines & Seepage pit				9 Feedyard		13 Insecticide storage		
Direction from well?						How man		
FROM	ТО		LITHOLOGI	IC LOG	FROM	ТО	PLUGGING II	NTERVALS
0	1	Surfac						
1	20	Sandy						
20	50 67	Clay ": Sand "						
50 67	74		red and	hlue"				
74	80		nd shale					
15	3.0	Cray a	na snare	100				
							REC	EIVED
							NOV 0	8 2004
						BUREAU OF WATER		
								OF WATER
						1		
7 CONTR	ACTOR'S C	DR LANDOWNE	ER'S CERTIFIC	ATION: This water well v	was (1) constr	ucted, (2) reco	onstructed, or (3) plugged un	der my jurisdiction and was
completed of	on (mo/day/y	/ear)1	0-27-04			and this re	cord is true to the best of my k	nowledge and belief. Kansas
completed of Water Well	on (mo/day/y Contractor's	vear)1 s Licence No	0-27-04 KWWCL-43		r Well Record	and this re was complete	cord is true to the best of my ked on (mo/day/yr)	nowledge and belief. Kansas

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies 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 to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> well.