1 LOCATION OF WATER WE		ER WELL RECORD	Form WWC-5 KSA 82a-	1212	
			Section Number	Township Number	Range Number
County: Phillips		SW 1/4 NW	T	T 4 S	R 17 x∈/w
Distance and direction from ne	earest town or city?		Street address of well if	ocated within city?	
2 WATER WELL OWNER:	CRA Refine	ery			
RR#, St. Address, Box # : City, State, ZIP Code :	Phillipsbu	ırg, Kansas	67661	Board of Agriculture, Application Number:	Division of Water Resource
3 DEPTH OF COMPLETED	WELL50ft.	Bore Hole Diameter	36 in. to 50		
Well Water to be used as:	5 Public water		8 Air conditioning	11 Injection we	
1 Domestic 3 Feedlot	6 Oil field water	er supply	9 Dewatering	12 Other (Spec	
2 Irrigation 4 Industrial	7 Lawn and ga	arden only	10 Observation well		
Well's static water level					
Pump Test Data Est. Yield 225 g	: Well water was. gpm: Well water was	34 ft. after . ft. after		hours pumping	
4 TYPE OF BLANK CASING	· · · · · · · · · · · · · · · · · · ·		8 Concrete tile		
	RMP (SR)	6 Asbestos-Cement) We	ded X
2 PVC 4	ABS	7 Fiberglass	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		eaded
Blank casing dia12	in. to3.5	ft Dia	in. to	ft Dia	in. to
Casing height above land surfa	ace6.	in., weight	44	ft. Wall thickness or gauge	No. 0.330
TYPE OF SCREEN OR PERF	ORATION MATERIAL:	, g	7 PVC	10 Asbestos-cen	
	Stainless steel	5 Fiberglass	8 RMP (SR)		·)
	Galvanized steel	6 Concrete tile	9 ABS	12 None used (c	•
Screen or Perforation Opening		5 Gauze	ed wrapped	8 Saw cut	
1 Continuous slot	3 Mill slot	6 Wire w		9 Drilled holes	(-)
2 Louvered shutter	4 Key punched	7 Torch		10 Other (specify)	
Screen-Perforation Dia 1.					
Screen-Perforated Intervals:	From 35	ft. to	0 ft., From	ft. to.	
Gravel Pack Intervals:			0 ft., From		
	From	ft. to		ft. to	
5 GROUT MATERIAL:	1 Neat cement			Other	
Grouted Intervals: From			ft. to	ft. From	ft to
What is the nearest source of	possible contamination:		10 Fuel s		Abandoned water well
1 Septic tank	4 Cess pool	7 Sewage lago		-	Oil well/Gas well
2 Sewer lines	5 Seepage pit	8 Feed yard			Other (specify below)
3 Lateral lines	6 Pit privy	9 Livestock per		tions come lines	
Direction from well	NW Hov	w many feet	50 water		
Phoonon nom wen				. X	: If yes, date sampl
•		partment? Yes			
Was a chemical/bacteriological was submitted	I sample submitted to De	day	year: Pump Installed	!? YesX	.No
Was a chemical/bacteriological was submitted	I sample submitted to De month name Layne & E	day	year: Pump Installed Model No 10 UHC	l? YesX. нр10	.No
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Was a chemical/bacteriological was submitted If Yes: Pump Manufacturer's n Depth of Pump Intake Type of pump: 1	I sample submitted to De month name Layne & E 45	dayBowler ft. 2 Turbine	year: Pump Installed Model No 10 UHC Pumps Capacity rated at 4 Centri	1? Yes X	.No
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