

1 LOCATION OF WATER WELL:		Fraction NW 1/4 SE 1/4 SE 1/4		Section Number 27	Township Number T 4 S	Range Number R 18 E/W						
County: Phillips												
Distance and direction from nearest town or city street address of well if located within city? Approximately 3/4 mile south and 1 1/4 miles west of Glade												
2 WATER WELL OWNER:		Phillipsburg, City of City Hall 945 2nd Street Phillipsburg, KS 67661			Board of Agriculture, Division of Water Resources Application Number: 7777							
RR#, St. Address, Box # :												
City, State, ZIP Code :												
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 23 ft. ELEVATION: ft.										
<div style="text-align: center;">N ↑ 1 Mile ↓ S</div> <div style="display: flex; align-items: center; justify-content: center;"><div style="text-align: center; width: 20px;">W</div><div style="border: 1px solid black; padding: 5px; text-align: center; width: 100px; height: 100px; position: relative;"><div style="position: absolute; top: 0; left: 0; right: 0; bottom: 0; border: 1px dashed black;"></div><div style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); font-size: 2em;">X</div></div><div style="text-align: center; width: 20px;">E</div></div>		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.										
		WELL'S STATIC WATER LEVEL 8.5 ft. below land surface measured on mo/day/yr 6-20-94										
		Pump test data: Well water was ft. after hours pumping gpm										
		Est. Yield gpm: Well water was ft. after hours pumping gpm										
		Bore Hole Diameter in. to ft., and in. to ft.										
5 TYPE OF BLANK CASING USED:		WELL WATER TO BE USED AS:										
1 Steel		3 RMP (SR)		5 Public water supply		8 Air conditioning	11 Injection well					
2 PVC		4 ABS		1 Domestic		3 Feedlot	6 Oil field water supply	9 Dewatering	12 Other (Specify below)			
				2 Irrigation		4 Industrial	7 Lawn and garden only	10 Monitoring well				
Blank casing diameter 12" in. to ft., Dia in. to ft., Dia in. to ft.							Was a chemical/bacteriological sample submitted to Department? Yes No ; If yes, mo/day/yr sample was submitted					
Casing height above land surface 8' below in., weight lbs./ft. Wall thickness or gauge No.							Water Well Disinfected? Yes No					
TYPE OF SCREEN OR PERFORATION MATERIAL:												
1 Steel		3 Stainless steel		5 Fiberglass		8 RMP (SR)		11 Other (specify)				
2 Brass		4 Galvanized steel		6 Concrete tile		9 ABS		12 None used (open hole)				
SCREEN OR PERFORATION OPENINGS ARE:												
1 Continuous slot		3 Mill slot		5 Gauzed wrapped		8 Saw cut		11 None (open hole)				
2 Louvered shutter		4 Key punched		6 Wire wrapped		9 Drilled holes						
				7 Torch cut		10 Other (specify)						
SCREEN-PERFORATED INTERVALS:		From ft. to ft., From ft. to ft., From ft. to ft.										
		From ft. to ft., From ft. to ft., From ft. to ft.										
GRAVEL PACK INTERVALS:		From ft. to ft., From ft. to ft., From ft. to ft.										
		From ft. to ft., From ft. to ft., From ft. to ft.										
6 GROUT MATERIAL:		1 Neat cement					2 Cement grout		3 Bentonite		4 Other	
Grout Intervals: From 8.5 ft. to 5 ft., From ft. to ft., From ft. to ft.												
What is the nearest source of possible contamination:												
1 Septic tank		4 Lateral lines		7 Pit privy		10 Livestock pens		14 Abandoned water well				
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage		15 Oil well/Gas well				
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage		16 Other (specify below)				
						13 Insecticide storage		None known				
Direction from well?							How many feet?					
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS						
				23	8.5	Chlorinated sand						
				8.5	5	Concrete grout						
				5	0	NOTE: Filled existing excavation from 8.5'-5' with concrete grout						
						Backfilled with topsoil and clay						
						Casing corroded, collapsed at 8' below ground						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 6-20-94 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/yr) 6-27-94 under the business name of Clarke Well & Equipment, Inc. by (signature) <i>Clarke Well & Equipment, Inc.</i>												
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT 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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.												