LOCATION OF WA	TED WELL:	Fraction	WELL RECORD	Form vv		tion Number	1	wnship Nu	mber	1	Range	Numbe	
LOCATION OF WATER WELL: County: Graham		SE 1/4	SW 1/4	NE 1/4		31	T	wnsnip ivi	S		23		ENT)
Distance and direction from nearest town		<u> </u>		74			, '		3	<u> </u>			(''
violation and allocator		•	1Mi.N., ½		•	Mi Son	ıth o	e 11:11	O: +				
WATER WELL OF	VNER: Cecil El	liot C/O B	ill Elliot	mires v	V . / 7	111. 20t	JUII O	r urit	CIEY				
•		.1100 0/0 B	M.	urfin I	Dril	ling, Ir	nc.					_	
RR#, St. Address, Bo		657.6	🗖	ov 661		5	ı		griculture, l				
City, State, ZIP Code	: Hill Cit	y, KS 676	$\frac{42}{\tilde{c}}$	olby	KS 6	7701		Application	Number:	9/	0272		
LOCATE WELL'S I	: Hill Cit OCATION WITH 4 N BOX:	DEPTH OF COM	IPLETED WELL.	- 220) 	. ft. ELEVA	TION:						
AN "X" IN SECTIO	N BOX: De	epth(s) Groundwa	ter Encountered	1		ft. 2	2 <i>.</i>		ft. 3			.	ft.
:			ATER LEVEL										
1			est data: Well wa						• •				
NW	NE Es		. gpm: Well wa						•				
¥ W 1													10
-		ELL WATER TO						onditioning		•	on well		
sw	SE	1 Domestic	3 Feedlot				9 Dewa		12				
	1 1 1 1	2 Irrigation	4 Industrial		_	arden only							
	l Wa	as a chemical/bac	teriological sample	e submitted	to De	epartment? Ye	es	No X .	; If yes	, mo/da	ıy/yr sa	mple v	vas su
•	ş mi	tted				Wa	ter Well	Disinfecte	d? Yes		No	Х	
TYPE OF BLANK	CASING USED:	5	Wrought iron	8 0	Concre	ete tile	CA	ASING JOI	NTS: Glue	dx.	Clar	nped .	
1 Steel	3 RMP (SR)	6	Asbestos-Cemen	t 9 C	Other	(specify below	w)		Weld	ed			
2 PVC	4 ABS	7	Fiberglass				·		Threa	aded			
Blank casing diameter	r 4.5 in		•		in. to		ft	Dia		in. to			ft
Casing height above													
TYPE OF SCREEN C			., weight		7 PV		it. Wan		estos-ceme		-1 0		
			F:h1										
1 Steel	3 Stainless st		Fiberglass			IP (SR)			er (specify)				
2 Brass	4 Galvanized		Concrete tile		9 AB				e used (op		•		
CREEN OR PERFO	RATION OPENINGS	S ARE:		ızed wrapp			8 Sav			11 N	one (o	pen ho	le)
1 Continuous sl	ot 3 Mill s	slot		e wrapped				led holes					
2 Louvered shu	tter 4 Key _I	punched	7 Tor	ch cut			10 Oth	er (specify)				
SCREEN-PERFORAT	ED INTERVALS:	From	.80 ft. to			ft., From	m		ft. t	o			ft
		From											
GRAVEL PA	ACK INTERVALS:	From	.20 ft. to	220)	ft., Froi	m		ft. t	0			ft
		From	ft. to			ft., Froi							f
GROUT MATERIA	L: 1 Neat cerr		Cement grout		Rento								
	om 0 ft.												
	ource of possible cor				. 11.	10 Lives					ned wa		
			7 Dit maion.				•	13					"
1 Septic tank	4 Lateral I		7 Pit privy			11 Fuel	_		_		Gas w		
2 Sewer lines	5 Cess po		8 Sewage la	agoon		12 Fertili		•	16 C	other (s	pecify	below)	
_	wer lines 6 Seepage	e pit	9 Feedyard			13 Insec		-					
Direction from well?	North					How ma	ny feet?						
FROM TO	<u> </u>	LITHOLOGIC LC)G	FRO		TO			ugging i	NTER	/ALS		
0 2	Surface				LO	112		nted sa					
2 10	Loess			1	.2	119	Clay	, calio	he & f	ine	sand		
10 18	Fine sand v			1_1	L9	130	Clay	, calid	che, &	fine	san	d	
18 25	Caliche w/	fine sand	& clay		30	139	_	& sand					
25 33	Sandy clay			- 1	39	143		& sand					
33 39	Cemented sa				13	145	_	nted s					
39 50	Cemented sa					i I							
					46	159		& clay					
50 52	Cemented sa		Jue	1 .	59	179			gravel				
52 59	Fine sand				79	199			gravel	- W/	clay	, stl	S
_5974	Fine sand,			I	99	204	Sand	& cla	<i>Y</i>				
74 79	Cemented sa	and, fine a	sand & cali	ch ¢ 20	04	216	Sand	& joi	nt clay	?			
79 85	Cemented sa				16	220	Ochr						
1 ^^	Cemented s												
85 93 93 99	Fine sand												
99 110	Clay & fine					t t							
	-				Name and Associated Section 1997		need to the transition of the contract of the	The second second second second second				.,	
CONTRACTOR'S	OR LANDOWNER'S	CERTIFICATION	N: This water well	was (1) co	onstru	cted, (2) reco	onstructe	ed, or (3) p	lugged und	der my	jurisdi	ction a	nd w
completed on (mo/day	y/year)					and this reco	ord is tru	e to the be	st of my kn	owled	ge and	belief.	Kans
Vater Well Contracto	r's License No				rd wa	s completed	on (mo/	day/yr)	7-10-9	7.10	<u>// .</u> .		
nder the business na	ame of WOC	ofter Pump	& Well, Inc	с.		by (signa	iture)	NI.	no Chi	WAR	70	W	
INICTOLICATIONIC: LI	typewriter or ball point pen	PLEASE PRESS FIRM	ALV and PRINT clearly	Please fill in h	olanks	underline or circle	e the corre	ct answers. S	eng top three	copies	Kansas	Denartr	nent