| | ATER WELL R | | | | | vision of Water | | | |
|--|--|---------------------|--------------|---------------------------|-----------------|--|-------------------------|---------------------------------|--|
| | Original Record | | | | | ources App. No | | Well ID | |
| 1 | LOCATION OF W County: Wyandott | | L: | Fraction 4 SE | 4 NE 4 | tion Number 29 | Township Numb | er Range Number R 25 ■ E □ W | |
| 12, | | | | | | | | | |
| | 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: | | | | | | | | |
| | Address: One Willia | | | | 1 | lorth of 12th Street & Esplande on N. side of RR tracks | | | |
| | | | | | | total of 12al offeet & Esplande on 14. side of 14.4 daois | | | |
| A TOGUERY WINDS | | | | | | | 20.4407/ | | |
| WITH "V" IN 4 DEPTH OF COMPLETED WELL: 1. 5 Latitude: | | | | | | | le:39.148/6 | 61 (decimal degrees) | |
| ! | SECTION BOX: Depth(s) Groundwater Encountered: 1)NA 2) ft. 3) ft., or 4) | | | | | | | | |
| | WELL'S STATIC WATER LEVEL: | | | | | ft. Source for Latitude/Longitude: | | | |
| ΙГ | below land surface, measured on (mo-day-y above land surface, measured on (mo-day-y | | | | | | | ·) | |
| - | | | | | | (WAAS enabled? Tyes No) | | | |
| | Pump test data: Well water was | | | | | ☐ Land Survey ☐ Topographic Map Online Mapper: Google earth | | | |
| W | Well water was ft. | | | | | ■ On | ine Mapper: | Calui | |
| - | after hours pumpinggpr | | | | | (FI | | | |
| L | Estimated Yield:gpm | | | | | 6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map | | | |
| | S Bore Hole Diameter: 3.25 in to 40 in to | | | | | Other | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | |
| | omestic: | | | ater Supply: well ID | | 10. 🔲 Oil l | Field Water Supply: 16 | ease | |
| | ☐ Household 6. ☐ Dewatering: how many wells? | | | | | 11. Test Hole: well ID | | | |
| . – | ☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID | | | | | ☐ Cased ☐ Uncased ☐ Geotechnical | | | |
| . = |] Livestock] Irrigation | | | g: well ID | | 12. Geothermal: how many bores? | | | |
| | 2. ☐ Irrigation 9. Environmental Remediation: well ID . ☐ 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ext | | | | | b) Open Loop Surface Discharge Inj. of Water | | | |
| 4. | Industrial | | Recovery | | | | | | |
| Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted: | | | | | | | | | |
| Water well disinfected? ☐ Yes ■ No | | | | | | | | | |
| 8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded | | | | | | | | | |
| Casing diameter 1 in to 38 ft., Diameter in to ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 0 in Weight lbs./ft. Wall thickness or gauge No. sch 40 | | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | | |
| ☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify) | | | | | | | | | |
| ☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) | | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | |
| ☐ Continuous Slot Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) | | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From .38ft. to .40 | | | | | | | | | |
| GRAVEL PACK INTERVALS: From 36 ft. to 40 ft., From ft. to ft., From ft. to ft. | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | |
| Nearest source of possible contamination: Septic Tank | | | | | | | | | |
| Sewer Lines □ Cess Pool □ Sewage Lagoon □ Fuel Storage □ Abandoned Water Well | | | | | | | | | |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well | | | | | | | | | |
| ☐ Other (Specify) Direction from well? Distance from well? ft | | | | | | | | | |
| | FROM TO | | | GIC LOG | FROM | | | PLUGGING INTERVALS | |
| | | NA AV | ···· | ore Eco | 1 | 10 1 | | | |
| | | | | | | | | | |
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| | | | | | Notes: | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged | | | | | | | | | |
| under my jurisdiction and was completed on (mo-day-year) 2-20-16 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 604 This Water Well Record was completed on (mo-day-year) | | | | | | | | | |
| und | ler the business name | of Environ | mental P | riority Service, inc | Si | gnature\.\.\.\ | d. 27. | | |
| | Mail 1 white copy alo | ng with a fee of \$ | 5.00 for eac | ch constructed well to: K | ansas Departmen | of Health and E | nvironment, Bureau of W | ater, GWTS Section, | |
| 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524. | | | | | | | | | |
| Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015 | | | | | | | | | |