54 10030 WATER WE	LL RECORD	Form W	WC-5	Division of Wate	r Resources App. No).
1 LOCATION	OF WATER WELL:	Fraction		Section Number	Township No.	Range Number
County:	Geary	1/4 NW 1/4 NV	V 1/4 NW 1/4	29	T 10 s	R 5 ⊠E □W
Street/Rural	Address of Well Location;	if unknown, distance d	& direction	Global Positioning	39.159692	(in decimal degrees)
from nearest town or intersection: If at owner's address, check here Approximately 3/4 mile southeast of Milford				Latitude: 39.159692 (in decimal degrees) Longitude: -96.90551 (in decimal degrees)		
Approximately	7 3/4 ITIIIE SOULITEAST OF IV	illioru	Flevation:	unknown		
2 WATER WELL OWNER: City of Milford				Datum: WGS 84, NAD 83, NAD 27 Collection Method:		
RR#, Street Address, Box #: 201 12th Street				Collection Method: ☐ GPS unit (Make/Model: WAAS)		
City, State, ZIP Code P.O. Box 279				☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey		
	Militora, K	S 66514-0279		Est. Accuracy: <	3 m, 🛛 3-5 m, 🔲	5-15 m, □>15 m
3 LOCATE WI WITH AN "X	"IN 4 DEPTH OF	COMPLETED WEL	L	35 ft.		
SECTION BOX: Depth(s) Groundwater Encountered (1) ft. (2) ft. (3) ft. WELL'S STATIC WATER LEVEL 14.35 ft. below land surface measured on mo/day/yr 9/20/10						
N	WELL'S STATI	C WATER LEVEL_	14.35 _{ft.}	below land surface i	neasured on mo/da	$ay/yr_{-} = 9/20/10$
×	I FOR MIET DUN	test data: Well wate				
NW -	-NE EST. YIELD Bore Hole Diam	eter 10 in. to _	r was 35 f	t and in	to	pinggpm fi
** - 	WELL WATER	TO BE USED AS:	Public water	er supply	othermal I	njection well
SW SE Domestic Feedlot Oil field water supply Dewatering Other (Specify below) Irrigation Industrial Domestic-lawn & garden Monitoring well Test Well						
	☐ Irrigation	☐ Industrial ☐	Domestic-law	n & garden Mo	nitoring well	Test Well
S		bacteriological sample			Yes 🔀 No	
	Water well disin	day/yr sample was sul fected? X Yes	omittea			
, mype of c						
	ASING USED: ☐ Steel TS: ☑ Glued ☐ Clar					
Casing diame	eter 5 in to 1	ft. Diameter	in. 1	o ft Di	ameter	in to ft.
Casing heigh	t above land surface4	in., Weight	2.36	lbs./ft., Wall thick	eness or gauge No	.214
Casing diameter 5 in. to 13 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 24 in., Weight 2.36 lbs./ft., Wall thickness or gauge No214 TYPE OF SCREEN OR PERFORATION MATERIAL:						
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify) ☐ Brass ☐ Galvanized Steel ☐ None used (open hole)						
SCREEN OR I	DEDEOD ATION OPENING	C ARE.				
Continu	ious slot Mill slot ed shutter Key punched FORATED INTERVALS:	Gauze wrapped	Torch cut	Drilled holes	None (open hole	e)
Louvere	ed shutter	Wire wrapped	Saw cut	Other (specify)		
SCREEN-PER	FORATED INTERVALS:	From 13	ft. to	ft., From	ft. t	to ft.
GPAI	/EL PACK INTERVALS:	From 13	ft to3	j ft From		to II.
GRAV						to ft.
6 GROUT MA	mpprat Dat	. 🗖 <	. 🔼			1000
Grout Interva	ls: From ft. to	ft., From	n _0	it. to 13 ft.,	From	ft. to ft.
What is the near	rest source of possible conta	min <u>at</u> ion:	_	_		
Septic t		es Pit privy Sewage lagoon	Livestock p Fuel storage			er (specify below)
		it Feedyard	Fertilizer st			None known
Direction fro			Distance i	rom well		
FROM TO	LITHOLOG	IC LOG	FROM			GGING INTERVALS
0 4	Topsoil					/incent of Ground
4 14 14 25	Clay, tan, soft, silty Sand, fine to very fine	loose clean				vith Richard Harper
25 27	Clay, reddish brown,		 		gged by pulling	
27 31	Clay, brown, firm	, only				ed short grout on
31 34	Sand, fine to very fine	, limestone pieces		constructi		3.32.0
34 35	Limestone, yellow, tur					
	CODIC OR LAND OFFI	IC CEDMINIC : TO	N. T.	57		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 9/20/10 and this record is true to the best of my knowledge and belief.						
i dilder illy juilled	Vell Contractor's License N	(IIIO, day_)		ecord was completed		75.14.0.14.0
under the busin	ess name of Clarke	e Well & Equipment	t, Inc.	by (signature)\tau	P(m)	
INSTRUCTIONS:	Use typewriter or ball point pe	n. <u>PLEASE PRESS FIRML</u>	y and PRINT c	early. Please fill in blank	s and check the correc	t answers. Send three copies
(white, blue, pink) Telephone 785-29	to Kansas Department of Health 6-5522. Send one copy to WAT	and Environment, Bureau ER WELL OWNER and re	i of water, Geole etain one for vo	ogy Section, 1000 SW Ja ur records. Include fee	ckson St., Suite 420, of \$5.00 for each co	Topeka, Kansas 66612-1367. Instructed well. Visit us at
http://www.kdheks.	gov/waterwell/index.html.		3.14 IOI JO			
KSA 82a-1212				Check: Wh	ite Copy, 🔲 Blu	ie Copy, 🔲 Pink Copy