	ION OF MATE	DWELL		IER WELL RECO	JRD For		KSA 82a					 1
	ION OF WATE		l l		-		tion Numbe		nship Numb	er R	lange Number	·
County:		wnee			SW		17	T	11	N R	16	E
Distance ar	nd direction fro	om neares	t town or city street a									
				110 NE Ly	yman Ro	ad, Tope	ka, KS					
2 WATER	WELL OWNE	R· KD	HE-UST Progra	am					•			
			0 SW Jackson					Board	l of Agricultui	e, Division of	Water Resou	rces
City, State,	ZIP Code	; Toj	oeka, KS 66612					Applic	ation Number	er:		
LOCATI	E WELL'S LO	CATON W	/ITH _A							,		
AN "X" I	IN SECTION E	BOX:	DEPTH OF	COMPLETED	WELL	28	ft. EL	EVATION:				
	N		Depth(s) Groun	dwater Encoun	tered 11.5			ft. 2		ft. 3		Ft.
	i	i										
.	· į	į	WELL'S STATI									
-	NW	NE	Pun	np test data: V	Vell water v	was 🚃		Ft. after	<u> </u>	ours pumping	9	}pm ≀
		1	Est. Yield	Gpm: V	Vell water v	was		Ft. after	ŀ	lours pumpin	a G	em l
₩ W		. !	E Bore Hole Diam	neter 6.25	In to	28	?	ft and		in to		_ !
-	i I	į		TO BE USED A		hlic water s	innly	II. aliu Ω Δir	conditioning	11. lu	tion well	- ["
	sw	_ SE	WELL WATER 1 Domest	ic 3 Feed lot	NO. 6 Oil	field water	supply	9 De	watering	12 Othe	r (Specify belo	JM) I.
]	SYV : 1 -	- JL	1 1 50 100			iloid water			watering			,,,
↓	i x	į	2 Irrigation	n 4 Industria	ıl 7 Lav	wn and gard	len (domes	tic) 10 <u>M</u>	onitoring wel	<u></u>	MW-4	
'		!	Was a chemica	l/bacteriological	sample su	bmitted to [Department	? Yes	No X	If ves. mo/da	v/vr sample w	as
Was a chemical/bacteriological sample submitted to Department? YesNo XIf yes, mo/day/yr sample was Submitted Water Well Disinfected? YesNo XNo X												
												
D TYPE 0	OF BLANK CAS	SING USE	:D:	5 Wrought	Iron	8 Concr	ete tile	CASI	NG JOINTS:	Glued	Clamped	
1 Ste	eel	3 R	MP (SR)	6 Asbesto	s-Cement	9 Other	(specify be	low)		Welded		
2 PV	IC.	7 4 A	` '					-			Υ	
2 2	, C	4 A	00	7 Fibergla	33					Threaded		
Block cos!-	a diameter	Λ	in to 1	Ft.,		1- 4	•	A Die		مة سرا		
biank casin	iy diameter _		in. to 1	o Dia		in. 1	·	π., Dia		in. to		- ^{π.}
Casing heig	ght above land	surface	FLUSH	_ In., weight	SC	H 40	Lbs./	ft. Wall thic	kness or gau	ge No.		
			TION MATERIAL:			7	PVC		10 Asbestos	-cement		
1 Ste				5 Fiberala	ee							
1		4 0	ainless steel	6 Constate	a tila	0	ABS	,	10 None ve	ecity)		
2 Bra		_	alvanized steel	6 Concrete						ed (open hole		.
SCREEN	OR PERFORA	HON OPE	NINGS ARE:			wrapped		8 Saw		11 No	one (open hole	∍)
1 Co	intinuous slot		3 Mill slot		6 Wire w	rapped		9 Drille	ed holes			1
2 Lo	uvered shutter	r	4 Key punched		7 Torch o	ut		10 Othe	er (specify)			- 1
SCREEN B	PERFORATED		• •	13 ft.	to	28	f4	Erom	, ,	ff to		
SCREEN-F	LINIONALL	IN LIVY										
			From	ft.	. to	,	^{ft.}	From		ft. to		_ Ft.
SAI	ND PACK INT	ERVALS:	From	ft.	. to	28	ft.	From		ft. to		Ft.
			From		. to							Ft.
6												
e GROUT	MATERIAL:	1 N	eat cement	2 Cement grou		3 Ben	tonite	4 Other				
		0.5	a. 4 E	Ft.	4 5	Ft.	4	4	_			
			ft. to 1.5	From3	1.5	to						_ ft.
What is the	nearest source	e of poss	ble contamination:				10 Live	estock pens	1	4 Abaridone	d water well	1
1 Se	ptic tank		4 Lateral lines	. 7	Pit privy		11 Fue	l storage	1	5 Oil well/ G	as well	
	wer lines		5 Cess pool		Sewage la		12 For	tilizer storag	n 1	6 Other (end	cify bolow)	\neg
			•		-	•		_		Other (spe		
3 Wa	atertight sewer	lines	Seepage pit	9	Feedyard			ecticide stora	age	Contam	inated Site	e .
Direction fro	om well?						How man	y feet?				
FROM	ТО	CODE	LITHO	LOGIC LOG		FROM	ТО		PLUGG	ING INTERVA	ALS	
0	0.5	+ <u>-</u>	Asphalt				+	+				-
_		ļ <u></u>					 					
0.5	5		Clay				 	-				
5	28	L	Sand				1			**********		
28	TD		End of Boreho	ie		ļ						
]
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	1	 					1					
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	1							1				
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		1										
							1	†				
7 CONTR	ACTOR'S OR	I ANDOM	NER'S CERTIFICAT	ION: This water	er well was	(x) Constant	ted. (2) rev	constructed	or (3) plugge	ed under my i	urisdiction and	1 w
			06/0									
Water Well	Contractor's L	icense No).	585		This W	ater Well F	Record was	completed or	n (mo/day/ <u>yr)</u>	07/1,8/1	1
under the business name of Associated Environmental, Inc. By (signature) Bradley J. Janson												
INSTRUCTIONS:. Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment of Health and												
Kansas	s 66620-0001.	Telephone	913-296-5545. Send	one to WATER V	WELL OWN	ER and retain	one for you	ur records.`		777	,	_
							,					——