WATER WELL RE		Form WW			sion of Water		Well ID		
Original Record C			Well Use		irces App. No		r Range Number		
1 LOCATION OF WAT	TER WEL	Linn, Fr	ction		ion Number	Township Numbe			
County: Dickins	m-156.	SUKLINI	N. W. 184. 214. /	1/4	39	T // (S)	R 3 PE□W		
2 WELL OWNER: Last	Name: M	OSICV Fir	St. Tallian Land	treet or Rur	al Address w	here well is located (if unknown, distance and		
Business: direction from nearest town or intersection): If at owner's address, check here.									
	Noit.	RX					1		
Address: Abs Line State: H. S ZIP: 67410									
<u> </u>					T	-00 -0	000		
3 LOCATE WELL	4 DEPTH	OF COMPL	ETED WELL:	<i>(00</i>) ft.	5 Latitud	N 39 03.	298(decimal degrees)		
WITH "X" IN	Depth(s) Groundwater Encountered: 1)								
SECTION BOX:	2) ft. 3) ft., or 4) Dry Well					tol Dotum: LANGE 94	MAD 83 MAD 27		
N						C T - 124 - 3 - 17 24 - 3			
WELL'S STATIC WATER LEVEL: 50ft. Source for Latitude/Longitude: GPS (unit make/model CAPAINE)									
1 1 1 1						(WAAS enabled? Yes No)			
NW NE	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	after hours pumping					Online Mapper:			
W X E	Well water was ft.				G onime stepper				
SW SE	after hours pumping gpm					11001			
	Estimated Yield:				6 Elevat	ion: ././ft,	Ground Level TOC		
S	Bore Hole	Diameter: 9	in to 100	ft. and	Source:	☐ Land Survey ☐ G	SPS Topographic Map		
1 mile	Dorc Hole	Diamotor	in. to	ft.		☐ Other			
7 WELL WATER TO BE USED AS:									
1. Domestic:			Supply: well ID		10 🗀 Oil	Field Water Supply: les	ase		
lousehold						ole: well ID			
Lawn & Garden	·· · · · · · · · · · · · · · · · · · ·						· ·		
Livestock									
2. Irrigation									
3. Feedlot	9. Environmental Remediation: well ID								
4. Industrial		Recovery	☐ Injection	action			charge [] Inj. of water		
Was a chemical/bacterio			d to KDHE? 🔲 Y	es 🗹 No	If yes, date	sample was submitted	1:		
Water well disinfected?	Yes □	No ,							
8 TYPE OF CASING U	JSED: 1	Steel PVC [1 Other	CASIN	IG JOINTS:	☐ Glued ☐ Clamped	☐ Welded ☐ Threaded		
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in to ft. Diameter in to ft.									
Casing diameter									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
Steel Stainless Steel Fiberglass PVC Other (Specify)									
□ Brass □ Galvanized Steel □ Congrete tile □ None used (open hole)									
SCREEN OR PEDEOR A TICK! OPENIAL SCA DE									
Continuous Slot									
SCREEN OR PERFORATION OPENINGS ARE: Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify) Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)									
SCREEN-PERFORATED INTERVALS: From									
CDAVE DACE THE DVALCE From 2 & 4 to 1/0 A From A to A From A to A									
GRAVEL PACK INTERVALS: From									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From									
Nearest source of possible		ion:	Vone Z Los						
Septic Tank	_	Lateral Lines	☐ Pit Privy		Livestock Per		cide Storage		
☐ Sewer Lines		Cess Pool	☐ Sewage Lag		Fuel Storage		oned Water Well		
☐ Watertight Sewer Line		Seepage Pit	☐ Feedyard		Fertilizer Stor	age □ Oil Wel	ll/Gas Well		
Other (Specify)				•••					
Direction from well?									
10 FROM TO		LITHOLOGIC	LOG	FROM	TO	LITHO. LOG (cont.) or	PLUGGING INTERVALS		
5	TO # 50	iL							
1 25	Brown	- CLAY							
15 20	inst	Sec							
×30 130, 1	Can sa		7						
211 02	CA AMA	Show	(WATIN)		-				
37 12	CHAIS,	70 21 1	111						
12 18	y chog	Shav			LL				
78 92	LIACS	TON G		Notes:					
92 100 Gay Shell									
10.						1			
11 CONTRACTOR'S	OR LAND	OWNER'S C	ERTIFICATION	This water	r well was	constructed. reco	onstructed, or Dugged		
under my jurisdiction and	d was com	oleted on (mo-	day-year) 7/2/	201.5. and	this record	s true to the best of m	y knowledge and belief		
Kansas Water Well Cont	ractor's Lie	cense No 4	This Wat	er Well Re	cord was con	pleted on (mo-day-ve	onstructed, or plugged y knowledge and belief. (sear)		
under the business name	of 4/	1) Landa	WW D	CULIA	6	/ lain	ILI CWY		
under the business name Mail 1 white copy alon	g with a fee o	f \$5.00 for each co	enstructed well to: Kans	as Departmen	of Health and	Environment, Bureau of W	acr, WTS Section,		
1000 SW Jackson St	Suite 420 To	opeka, Kansas 666	12-1367. Mail one to V	Vater Well O	ner and retain o	ne for your records. Deleph	ione 785-296-5524.		
Visit us at http://www.kdheks.s			1	KSA 82a-12	212		Revised 1/20/2015		
VISIT US at HUD.//WWW.KUHEKS.	SULL WALCH WELL	u muca muni							