			Form '			Di	vision of Wa	ter	, <u>, , , , , , , , , , , , , , , , , , </u>		Andrew Carlos Commence of the	
				e in Well Use			ources App.			Well ID		
		WATER WEI	LL:	Fraction			ction Numb	er	Township Numb	er Rang	e Number	
County	: <i>6</i>	COLY		5W/45E1/454		1/4	_32_		T // (S)	R 5	EUW	
2 WELL OWNER: Last Jame: ANTILA First: Lance Street or Rural Address where well is located (if unknown, distance and												
Business: Address: Address: Address: Address:												
Address:	Address: Ogden State: KS ZIP: 66517 + KTh North on DOWNING											
City:	OAA	α	State: K.	S ZIP: 66 51	11	KINI	vorry e	on ,	DOWNING			
3 LOCATI	E WELL	1		IPLETED WEL		U I			7			
WITH "		Denth(s) G	roundwater	II LE I ED VYEL Encountered: 1)	119	6. W.C. 1						
	SECTION BOX: Depth(s) Groundwater Encountered: 1) 4.2 . 2)						Thus 1974 1					
i	WELL'S STATIC WATER LEVEL:						Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude:					
		☐ below	and surface	, measured on (mo	-day-y	/r)	GPS (unit make/model:					
above land surface, measured on (mo-day-ye							(WAAS enabled? ☐ Yes ☐ No)					
	Pump test data: Well water was ft.						☐ Land Survey ☐ Topographic Map					
W							Online Mapper:					
SW	SWSE Well water was ft. after hours pumping gp									çını cəmətini in the state of t		
	Estimated Yield:gpm						6 Elevation:ft. Ground Level TOC					
S	Bore Hole Diameter: in. to							<u>ce</u> : \square	Land Survey	GPS 🔲 Top	ographic Map	
	1 mile in. to ft							Other				
7 WELL WATER TO BE USED AS:												
1. Domestic:		5.	Public Wa	ter Supply: well II	D		10. 🔲 C	Dil Fiel	ld Water Supply: le	ease		
	Household 6. Dewatering: how many wells?											
☐ Lawn o	Lawn & Garden 7. Aquifer Recharge: well ID								☐ Uncased ☐ (
	☐ Livestock 8. ☐ Monitoring: well ID								al: how many bores Loop Horizont			
3. ☐ Feedlot									oop Surface Di			
4. ☐ Industrial ☐ Recovery ☐ Injection							13. ☐ C	13. Other (specify):				
Was a chemical/bacteriological sample submitted to KDHE? Yes Yes If yes, date sample was submitted:												
Water well disinfected? Ves \(\sigma \) No												
8 TYPE O	E CASINO	GUSED: DS	teel DPV	С П Other	 	CASI	NG JOINT	S: 🗆	Glued \square Clamped	d □ Welded	☐ Threaded	
8 TYPE OF CASING USED: Steel PVC Other												
Casing diameter 5												
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 OPENIXO SHEET SCREEN OR PERFORMANT OPENIX SHEET SCREEN OR SHEET SCREEN O												
☐ Continuous Slot												
	red Shutter	□ Kev Purc	hed $\square W$	ire Wrapped [_ 101 ∃ Saw	Cut \square	None (Open)	Hole)	omer (Specify)	*************	22.55.25.5	
SCREEN-P	ERFORAT	TED INTERV	ALS: Fron	1 80 ft. to	10	Off From	fi	to.	ft From	ft to	fi	
SCREEN-PERFORATED INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other.												
Grout Intervals: From												
Nearest source of possible contamination:												
Nearest source of possible contamination: Volume Fit Privy Livestock Pens Insecticide Storage												
☐ Sewer I			Cess Pool	☐ Sewag			Fuel Storag			oned Water W	ell	
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
☐ Other (Specify)												
10 FROM	TO		ITHOLO		111 VVC	FROM	ТО		HO. LOG (cont.) or		INTERVALS	
D	7	100 Sa	.2	310 200		94	100	B	11. 150 (Cont.) of	Child	INTERVALS	
7	9	Briva	1 60	4		//	100		4 Coly 1	7,000		
9	4/	Robani 1	tour of								-	
31	112	CON 18	321 6%	Alc _				 	······································		·	
112	13	Find of the	100	(WITH)						<u></u>	
13	nZ	GOOL D.	70 0	nal .	<i>f</i>					<u> </u>		
8%	181	Link CTON	1000	W-61		Notes:				- Contract		
81 GV Rose Clase							<u></u>					
01 71 Drow > MIL												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, \Box reconstructed, or \Box plugged												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-gear) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 4.5												
Nansas Wat	isiness non	ne of	ense ivo. 9	MAN ONTA	wat	er well Ke	cord was co	mplet	ed on (mo-day-ye	ear)	M. LUIS	
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas												
THE TRUE	Department of I	lealth and Environm	ient, Bureau of	Water, Geology Section	, 1000 S	SW Jackson St.,	Suite 420 Tope	ka, Kans	sas 66612-1367. Telepho	one (785) 296-356	y to Kansas 5.	
Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420 Topeka, Kansas 66612-1367. Telephone (785) 296-3565. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 9/10/2012												