LOCATION OF WATER WELL:			Fraction:		/4				Number: Township Number:			Range Number:	
County:	Shawnee	m the neares	SE 1/4		/4 NE i/ dress of well, if i		24	·	12		15 Eqs	1	
				y street add	ALESS OF WELL, IF I	n city?							
	S of NE come			M				14/911					
2		WELL OWNER:		•				WELL ID: MW1					
ĺ		ddress, Box #:		•				Board of Agriculture, Division of Water Resources					
		te, Zip Code:						Application Nu					
3 LOCATE V		4 DEPTH						_ft.	ELEVATION:		(ГОС)		
WITH	AN 'X"		roundwater										
		W	/ELL'S STATIC	WATER LEVE	EL:			feet below lan	d surface meas	sured on mor	th/day/year		
li) X	Pur	np test data:	: əll water w	OS	feet d	after		hours		gpm		
		Est. Yield	W		os	feet o	after		hours	A COURSE OF LA COU	gpm		
					,	feet,	and		hours		feet		
:		WELL WATER	O BE USED A	_	5 PWS	_		8 air condition		11 injection			
			1 domestic					9 dewatering		12 other (sp			
	2 irrigation 4 industrial			7 lawn/garden			O monitoring well		1				
				ogical sample submitted Department?				portugues	no X				
· · · · ·	*		was submitted				'ell Disinfected?		•	no X			
5 TYPE OF	BLANK CASIN				5 Wrought			8 Concrete tile	9	CASING JOI	NTS:		
	1 Steel		3 RMP (SR)		6 Asbestos	-Cement		9 Other	Glued		Welded		
	2 PVC		4 ABS		7 Fiberglas	s			Clamped		Threaded	X	
Plant -		•	inches to	•	fact Di-			inches to		faat			
	diameter		inches to	0 2				_ inches to	lbo /60 = +14/-11	feet thickness or	man ione Ale	40	
Sing	ht above	iana surrace		<u> </u>	inches, weig	JI 1 <u>T</u>			lbs./feet Wall	mickness or	gauge No.	40	
PE GE SCD	EN OR PERFO	RATION MATE	RIAL:										
7	1 Steel		3 Stainless st	امو	5 Fiberglas	e		7 PVC		10 Asbestos	-coment		
					_								
	2 Brass		4 Galvanize	9CI S1001	6 Concrete	e IIIO		8 RMP (SR)		11 Other (sp	ресіту)		
CDEEN OR S	PERFORMATION	N OPENINGS A	NDE-										
- ALL	1 Continuous		3 MILStot		5 Gauzed	wannad		9 Saucest		11 Non- (-	non hole)		
,			000000000000000000000000000000000000000					8 Saw cut		11 None (o	pen noie)		
	2 Louvered	snuner	4 Key punc	nea	6 Wire wrap			9 Drilled holes					
					7 Torch cut			10 Other (spec	CITY)				
SCREE	EN INTERVALS:	from:	2	feet	to 12	feet	from:		feet to		feet		
1		from:		feet	to	feet	from:		feet to		feet		
					-		0.111		.00,				
DAVEL DAG	W MITTEN (ALC	from	1.5	feet	to 12	feet	from		foot to		foot		
KAVEL PAC	X INTERVALS:			_		_ 1001	morn:		feet to		feet		
		rrom:		_ feet	to	_ feet	IIOM:		feet to		feet		
6 GPONT	MATERIAL:	1 1	Neat cement	}	2	Cement	grout	X		3 Bentonite	X		
	rout Intervals:					feet,			feet to		feet		
				-	0.0	_ 1001,	110111		1001	1.9	1001		
WEST IS THE P	ne c rest source	•		Ti-									
Septic tank (1) Seepage pit (6)											storage (11)	X	
	Se	ewer lines (2)		Pit pivy (7)				Fertilizer storage (12)					
	Watertight se	ewer lines (3)		Sewe	Sewage lagoon (8))	-		storage (13)			
		teral lines (4)				Feedyard (9)			_				
						Abandoned water well (14) Oil/Gas well (15)							
	,	Cess pool (5)		_	⊔∧ O S	SIOCK POR	13 (10)						
<u> </u>	4									Other (speciffy) (16)		
Direçti	on from well?			_ H	ow many feet	approxin	nate)?			-			
FROM	TO	SEIC FOE		FROM				LITHOLOG	IC LOG				
	6.	Concrete	Linot	3.3.2.33		 	- 171	ТО		ыпосоц	LOG		
, 0		Concrete				1		ļ					
, 9, A	5'	Sand, fine-m	edium, clay,	gray, fill, we	of at 3.5"								
, 5'	10'	Clay, sand, g	ırcıv, wet. fill ı	material		1							
	 									F			
10'	15'	Clay, gray, w	G1										
f						+							
										WELL ID:	MW1		
						1		1		-			
						+				- WELL IAG:	00116851		
•									V	ARIANCE BY:	D. Taylor		
			. /							-		******************	
						+							
						<u> </u>							
	CONTRAC	TOR'S OR LAN	NDOWNER'S (CERTIFICATIO	DN: This water	well was	;	1)constructed.	2)reconstructed	, or 3)plugged	under my jurisdi	ication	
nd was cor	m pl eted on (n	nth/day/yr)	5/8/95			and thi	s reco				pelief. Kansas W		
•			527	,	. This Water \						Caron Ranges VV	G101	
under the business name: GeoCore Services Inc. by (signature)													
INSTRUCTION	VS: use typew	riter or ball po	oint pen. PLE	ASE PRESS F	IRMLY and PRII	NT clearly	. Plec	se fill in blanks, (underline or circ	le the correc	t answers. Sena	top three	
INSTRUCTIONS: use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top thre Kansas Depart. of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: (913) 296-5545. Send one to Well Owner and retain one to												in one for	
NO SCO DE											e mile and leid		