WATER WE			Form V					sion of Water			Well ID	MW8	
Original Record       Correction       Change in Well Use         1       LOCATION OF WATER WELL:       Fraction						Section Number Township Number Range Num							
County: GE	ARY			SE <sup>1</sup> / <sub>4</sub> NW First: MAF			J	12		<u>r 12 s</u>			
2 WELL OWI Business:	(K	Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:											
Address: 223 N. WASHINGTON Address:												_	
City: JUNCTION State: CITY ZIP: KS													
<b>3</b> LOCATE WI	LL		OF CON	IPLETED '	WELL:		ft.	5 Latitu	de:	39.0246	33	.(decimal degrees)	
WITH "X" IN SECTION BO		Depth(s) Groundwater Encountered: 1)					ft. Longitude:					.(decimal degrees)	
2) ft. 3) ft., or 4) [ WELL'S STATIC WATER LEVEL:							Dry Well <u>Horizontal Datum</u> : WGS 84 NAD 83 1ft. Source for Latitude/Longitude:				83 📙 NAD 27		
below land surface, measured on (mo-day						-yr)2/1	4/18		GPS (unit make/model:)				
NW NE Pump test data: Well water was						-yr)						No)	
w													
SW S			Well water was ft. after hours pumping gpm										
								6 Elevation: 984.59ft. 🗆 Ground Level 🖬 TOC					
S	Bore Hole I	Estimated Yield:gpm Bore Hole Diameter:				l	Source	Source: Land Survey GPS Topographic Map					
1 mile	•			in. to	<u> </u>	n.							
7 WELL WATER TO BE USED AS:         1. Domestic:       5. <ul> <li>Public Water Supply: well ID</li> <li>10.              <li>Oil Field Water Supply: lease</li> </li></ul>													
Household										ole: well ID			
Livestock	□ Lawn & Garden 7. □ Aquifer Recharge: well ID □ Livestock 8. □ Monitoring: well ID						□ Cased □ Uncased □ Geotechnica 12. Geothermal: how many bores?						
2. 🔲 Irrigation	2. Irrigation 9. Environmental Remediation: well I						a) Closed Loop 🗌 Horizontal 🗌 Vertica					tical	
3. 🛄 Feedlot 4. 🔲 Industrial	3. Feedlot Air Sparge Soil Vapor 4. Industrial Recovery Injection						n	b) Open Loop  Surface Discharge  Inj. of Water B. Dother (specify):					
	/bacte					Yes	No						
Was a chemical/bacteriological sample submitted to KDHE? □ Yes       No       If yes, date sample was submitted:         Water well disinfected? □ Yes       Image: No       No       If yes, date sample was submitted:         8 TYPE OF CASING USED: □ Steel Image: PVC □ Other       CASING JOINTS: □ Glued □ Clamped □ Welded Image: Threaded													
8 TYPE OF C. Casing diameter.	SING	USED: S	Steel 🔳 PV	C Other		(	CASIN	IG JOINTS:	Glue Glue	d 🗌 Clampe	d 🔲 Welde	ed 🔳 Threaded	
Casing height abo	ve land	in. 10 surface	ir.,	. Weight	· · · · · · · · · · · · · · · · · · ·	lb	s./ft.	Wall thick	ness or ga	m. to . .uge No	· · · · · · · · · · · · · · · · · · ·		
TYPE OF SCR	EN OI	R PERFORA	TION MA	TERIAL:									
☐ Steel ☐ Brass		nless Steel vanized Steel	☐ Fiber	•	PVC	used (one	en hole`		er (Specif	ý)			
□ Brass □ Galvanized Steel □ Concrete tile □ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:													
	Slot	Mill Slot		auze Wrappe	d 🗆 To	orch Cut		rilled Holes	Other	(Specify)			
Louvered S SCREEN-PERI	ORAT	ED INTERV.	ALS: From	n .20 ft	to 30	ft., I	From	ft. to		. ft., From	ft. te	o ft.	
GRAV	EL PA	CK INTERV.	ALS: From	n <u>18</u> fi	t. to30	ft., I	rom	ft. to		. ft., From	ft. te	o ft.	
9 GROUT MA Grout Intervals:	TERIA From	AL: $\square$ Neat of $0$	$\begin{array}{c} \text{cement} \\ 1 \end{array}$	Cement gro	ut 📕 Ba 1	entonite ft to	■ 01 16	ther Concre	16	ace Comple ft to 18			
Nearest source o				, 1 10111	1	1		, 110111					
Septic Tank	-		Lateral Line		Pit Privy			Livestock Per			icide Storag		
□ Sewer Lines       □ Cess Pool       □ Sewage Lagoon       ■ Fuel Storage       □ Abandoned Water Well         □ Watertight Sewer Lines       □ Seepage Pit       □ Feedyard       □ Fertilizer Storage       □ Oil Well/Gas Well													
Direction from well?													
	0		LITHOLO		ice from w	FR(						NG INTERVALS	
0 1		TOPSOIL											
1 14		SILTY CLAY	(CL)			_							
14 30		SAND(SW)					-						
						Not							
Notes:													
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) 2/7/18 and this record is true to the best of my knowledge and belief.													
Kansas Water V	/ell Co	ntractor's Lic	ense No.	585	. This W	ater We	ll Rec	ord was con	npleted o	m (mo-day-	year)/2/26	/18	
Kansas Water Well Contractor's License No. 585. This Water Well Record was completed on (mo-day-year) 2/26/18. under the business name of ASSOCIATED ENVIRONMENTAL INC. Signature Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Burgay of Water, GWTS Section,													
1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.											6-5524.		
Visit us at http://www.kdheks.gov/waterwell/index.html							KSA 82a-1212				<b>Revised 7/10/2015</b>		

