WATER WELL R	ECORD	Form WW		Div	ision of Water			
Original Record				Resources App. No.			Well ID	
1 LOCATION OF W				_{1/4} k Seα	Section Number Township Number Range Number T S R Z Z W			
County:) i () i	n Sone		(if unknown, distance and					
Business: COX	ist Ivalie.	Chris	stle		rection from nearest town or intersection): If at owner's address, check here:			
2 WELL OWNER: Last Name: Business: Address: Address: Address: Address: Address: Address: Address: Business: Address: Add								
City: BramF	mField State: CO, ZIP: 80021				1800 N. Maulbury Abilene KS			
3 LOCATE WELL			•	70 6	. 5 Latitude: (Mulberry) (decimal degrees)			
Y WITH "X" IN	Depth(s) Gr	oundwater Encou	TED WELL:	2ft.	Longitude:			
SECTION BOX:	2)	ft. 3)	ft., og 4) [Datum: WGS 84 NAD 83 NAD 27			
	WELL'S STATIC WATER LEVEL:3.2 below land surface, measured on (mo-day-y above land surface, measured on (mo-day-y above land surface, measured on (mo-day-y above land surface).					ft. Source for Latitude/Longitude: (T) GPS (unit make/model:) (WAAS enabled? □ Yes □ No)		
🔆								
NW NE	Pump test data: Well water was				Land Survey Topographic Map			
W E	after		oing		Online Mapper:			
SW SE	after		vas f sina					
	after hours pumping				6 Elevation:ft. Ground Level TOC			
S	Bore Hole I	iameter:	in. to <i>[</i>	ft. and	nd Source: Land Survey GPS Topographic Map			
	mile in. to tt.							
7 WELL WATER TO 1. Domestic:			nnly: well ID		10 🗆 0:1	Field Water Supply:	lanca	
☐ Household	□ Public Water Supply: well ID □ Dewatering: how many wells?				□ Oil Field Water Supply: lease Test Hole: well ID			
Lawn & Garden	7. Aquifer Recharge: well ID				⊉ Cas	Cased Uncased Geotechnical		
Livestock	8. Monitoring: well ID					12. Geothermal: how many bores?		
2. ☐ Irrigation 3. ☐ Feedlot		9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Extrac				a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water		
4. Industrial	Recovery Injection					13. Other (specify):		
Was a chemical/bacteriological sample submitted to KDHE? Yes You If yes, date sample was submitted:								
Water well disinfected?	Yes 🗆	No						
8 TYPE OF CASING USED: ☐ Steel ☑ PVC ☐ Other CASING JOINTS: ☑ Glued ☐ Clamped ☐ Welded ☐ Threaded								
Casing diameter								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ FVC ☐ Other (Specify)								
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) 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								
GRAVEL PACK INTERVALS: From								
9 GROUT MATERIAL: Neat cement Cement grout Dente Other Grout Intervals: From								
Nearest source of possible			10111	11. 10	II., FIOIII	11. 10	It.	
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage								
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well								
Other (Specify)			☐ Feedyard		retuitzet Stora	ige 🗆 Oil W	en/Gas wen	
Direction from well?	<i>E</i>			:11? <i>5.0</i> .		fi		
10 FROM TO	L	ITHOLOGIC L		FROM	TO I	LITHO. LOG (cont.) o	or PLUGGING INTERVALS	
0 22	YEllov	UABYO	/	/				
3/2 3/-	Vellau	Spa	100					
34 49	linge	<u> </u>	y					
42 58	Grav	Shale				Curionia Mi		
5-2 60	Brok	en Sha	ler Wa	ter			eturned to Sender	
60 70	Hard	Gray	hale	Notes:		ror Correc	ction Date: 11/30/17	
				-				
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) $9-80\%$, and this record is true to the best of my knowledge and belief.								
Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year)								
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 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.kdhe	eks.gov/waterwell/	index.html		KSA 82a-1	212		Revised 9/10/2012	