Form 3-3

COCATION OF WATER WELL: Fraction Nw NF x NF		WA	TER WELL RE		WC-5 KSA 8	2a-1212 ID	No. 02	LOMWO	12		
## STAND CASTROLOGY ALONG THE ALONG	1 LOCATION OF W	ATER WELL:				ction Number		ship Number		Range Nur	mber
## WELL OWNER: U.S. Art.my (c.t.c.) and of the process of well a located within oily? MATER WELL OWNER: U.S. Art.my (c.t.c.) or Fulful 2 MATER WELL OWNER: U.S. Art.my (c.t.c.) or Fulful 2 MATER WELL OWNER: U.S. Art.my (c.t.c.) or Fulful 2 MATER WELL OWNER: U.S. Art.my (c.t.c.) or Fulful 2 MATER WELL OWNER: U.S. Art.my (c.t.c.) or Fulful 2 MATER S. Address & Sol E 1 MATER S. Address & Sol E MANAS S. 7 yr (FO L.4) (fo.t.) AN O'L IN SECTION BOX:	Enty: JOHN:	son	NW 1/4	NE 4 A	13	Т	13 s	S R 21 PW			
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RRS, State, JP CODE : LATH STREET Sparley Top Code LATHS STREET LATH STREET	2 WATER WELL O	WNER: US A	any C-APS	OF ENGRS.	11101-	. ,		<u> </u>			
States 2P Code Exhaust S 1 y pro C4 DU C4							Board	of Agricultur	e Divis	sion of Wata	r Basauros
DOCATE WELLS LICCATION WITH 3 DEPTH OF COMPLETED WELL 7. P. R. ELEVATION: 1. 2 1. 3 1. 1 1.										sion or make	riesource
Depth(g) Groundwater Encountered 1. 1. 2. ft. 3. ft. Well Warten Level L. 1. below land surface measured on moldayly		,,	A DEBTH OF	COMPLETED WEL	9.0	# ELEV					
WELL STATIC WATER LEVEL. Well STATIC WATER LEVEL Melle water was 1, a ther hours pumping 0, g											
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SW	2 W										-1- 1
Was a chamical/bacteriological sample submitted to Department? Yes. Water Well Disinfacted? Yes No		1			5 Oil field wati	er supply	Dewaterin	g I	2 Othe	er (Specify b	elow)
Street Part	sw	SE	1								
Street Part	†		Was a chemical	Macteriological samp	ile submitted to D	epartment? Ye	s),X ; If ye	s, mo/	day/yrs samp	ole was su
1 Steel 3 RMP (SR) 8 Asbastos-Cement 9 Other (specify below) Welded		5	mitted			Wat	er Well Disin	ected? Yes		1	No X
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Blank casing diameter 2 in. to 5.9 it., Dia in. to it., Dia in. to casing diameter 2 in. to 5.9 it., weight in. to ibs./ft. Wall thickness or gauge No. Sett@U4 4/O in. Casing height above land surface. \$6.0 in., weight Development 1 in. to it. Asbestios-center 1 in. 1 in. 1 in. 1 in. 1 in. 2 in. 2 in. 1 in. to it. Asbestios-center 1 in. 1 in. 2 i	_	•	R)				-				•
Casing height above land surface. 3.6. in, weight. Ibs./ft. Wall thickness or gauge No. Set#6044 40 TYPE OF SCREEN OR PERFORATION MATERIAL: 2PVC 10 Asbestos-cement 1 Steel 3 Sainless steel 5 Fiberglass 8 RMF (SR) 11 Other (specify) 12 None used (open hole) 2 Brass 4 Galvanized steel 6 6 Concrete tile 9 ABS 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 9 ABS 12 None used (open hole) 1 Continuous slot 3 Wire wrapped 9 Drilled holes 10 Other (specify) 11 Other 11 Other (specify) 11 Other (specify) 11 Other (specify) 11 Other	(2)PVC		_								
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Owner used (open hole) 12 None used (open hole) 12 Continuous slot 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) 4 EEN-PERFORATED INTERVALS: From. 5.8 t. to 7.9 ft. From ft. to. 6 GRAVEL PACK INTERVALS: From. 5.0 ft. to 9.0 ft. From ft. to. 6 GRAVEL PACK INTERVALS: From. 5.0 ft. ft. to ft. from ft. to. 7 From. ft. to ft. ft. from ft. to. 8 GROUT MATERIAL: 1 Neat cement 9 Grout Intervals: From ft. to ft. from ft. to. 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 12 Sewer lines 13 Search and 12 Ferditzer storage 15 Oil well/Gas well 15 Oil well/Gas well 16 OCT 2 5 2004 BUREAU OF WATER NTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (ID)constructed, (2) reconstructed, or (3) plugged under my jurisdiction and to-completed on (mo/day/year) 9/17/09 and this record is true to the begt of my knowledge and beilef. Kar Water Well Contractor's Licence No. This Water Well Record was completed on (mo/day/year) 9/17/09 This Water Well Record was completed on (mo/day/year) 17/109 This Water Well Record was completed on (mo/day/year) 17/109 This Water Well Record was completed on (mo/day/year) 17/109 This Water Well Record was completed on (mo/day/year) 17/109											
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From. ft. to ft., From ft.,			From	t.	to	ft., Fro	m	<i></i>	ft. to.		f
GROUT MATERIAL: 1 Neat cement	GHAVEL	PACK INTERVA									
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D 5 CLAYEY SOIL WISAND 7.5 /R 3/2 \$ 9.5 CLAYEY SOIL WISAND 7.5 /R 25/1 9.5 9.0 LIMESTONE RECEIVED OCT 2.5 2004 BUREAU OF WATER INTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and completed on (mc/day/year) . 9/27/09 and this record is true to the best of my knowledge and belief. Kar Water Well Contractor's Licence No. 704 This Water Well Record was completed on (mc/day/y) 9/27/09	Direction from well	?				How m	any feet?	<i>P</i>	ACL	-117	
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Water Well Contractor's Licence No. 7.64	completed on (mo/d	ay/year) 9 /	7/04			and this rec	ord is true to	the best of m	y k y ow		
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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 three copies to Kansas Department of Health at Environment, Bureau of Water, Topeka, Kansas 66820-0001. Telephone 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constitution will.	INSTRUCTIONS: Use t	ypewriter or ball point po	en. <u>PLEASE PRESS</u>	TRMLY and PRINT clearly.	Please fill in blanks, ur	identine or circle th	correct answers	Send top three of	pies to Ka	ansas Department	or meanth and