WATER WELL R		WWC-5		sion of Water			
Original Record		ge in Well Use		urces App. No.		Well ID	
1 LOCATION OF W.		Fraction		tion Number	Township Numb	_	
County: Dickinson							
2 WELL OWNER: Last Name: First: Arnold Street or Rural Address where well is located (if unknown, distance and							
Business: Nagely direction from nearest town or intersection): If at owner's address, check here:							
Address: 1174 Keystone Rd 8 miles South of Abilene, Ks on Hwy 15 Address:							
City: Marysvil	lle _{State:} Ks	_{ZIP:} 66508	to 1400) Ave &	13/4 mile	Weat South side	
3 LOCATE WELL	1				<u> </u>		
WITH "X" IN	4 DEPTH OF CO	MPLETED WELL: .	⊅.Þ ft.			(decimal degrees)	
SECTION BOX:	Depth(s) Groundwater		Longitude:(decimal degrees)				
N	2) ft.	」Dry Well		Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27			
	WELL'S STATIC WATER LEVEL:35 ft. Source for Latitude/Longitude: Source for Latitude/Longitude: ☐ GPS (unit make/model:						
NW NE	above land surface		1	GPS (unit make/model:) (WAAS enabled? Tyes No)			
NW NE	Pump test data: Well		Land Survey ☐ Topographic Map				
w	afterhou			Online Mapper:			
	Well water was ft.				Comme Mapper		
SW SE	after hours pumping gpm						
	Estimated Yield:1.		6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map				
S							
mile in. to ft.							
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID							
1. Domestic:							
☐ Household ☐ Lawn & Garden	6. ☐ Dewatering: how many wells?			11. Test Hole: well ID			
Livestock	8. Monitori			☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?			
2. Trrigation	9. Environmen			a) Closed Loop Horizontal Vertical			
3. ☐ Feedlot	☐ Air Sparg					scharge Inj. of Water	
4. ☐ Industrial	☐ Recovery		37114011011				
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☑ No If yes, date sample was submitted:							
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded							
Casing diameter56 ft., Diameter in. to ft., Diameter ft., Diameter ft.							
Casing height above land surface							
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 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 36 ft. to 56 ft., From ft. to ft., From ft. to ft.							
GRAVEL PACK INTERVALS: From2.4 ft. to5.2 ft., From ft. to ft., From ft. to ft.							
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other							
Grout Intervals: From							
Nearest source of possible contamination:							
☐ Septic Tank ☐ Sewer Lines	☐ Lateral Lin		_	Livestock Pens		cide Storage	
★ Watertight Sewer Lines							
Direction from well? .NORTHEAST. Distance from well?							
10 FROM TO	LITHOLO		FROM			PLUGGING INTERVALS	
0 1	DARK TOP SOI						
	BROWN CLAY		1				
	LITE COLOR &	LITE GRAY C	LAY & S	HALE		 	
	HARD LIMESTO		1 - 7				
	LITE COLOR S		1 1				
	LITE COLOR L	·				<u>-</u>	
	HARD GRAY SH		Notes:				
TOUCS.							
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) 3/3/22 and this record is true to the best of my knowledge and belief.							
under my jurisdiction and was completed on (mo-day-year) 3/3/22 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No39.7 This Water Well Record was completed on (mo-day-year) 3/8/22							
under the business name	of	KANSAS DRILL	.T.N.GSig	nature	old to Martine	.	
Mail I white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau 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.							
I 1000 SW Jackson St.	., Suite 420, Topeka, Kansa	s 66612-1367. Mail one to	Water Well Own KSA 82a-12		for your records. Teleph	none 785-296-5524. Revised 7/10/2015	
Visit us at http://www.kdheks.							