| WATER WELL E | | | sion of Water | · | |
|--|---|--------------------------------------|--|--|--|
| Original Record | | | urces App. No. | | Well ID |
| 1 LOCATION OF WATER WELL: Fraction | | | Section Number Township Number Range Number T J S R 2 DE T W | | |
| County: Marion 1/456/4NW1/4SW/ 2 WELL OWNER: Last Name: First: Street | | | | TIFS | R J DE W |
| 2 WELL OWNER: Last Name: Business: Address: Address: 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: Marc B all Oh Rad | | | | | |
| Address: City: Hillsborg State: K ZIP: 67063 3 S | | | | | |
| 3 LOCATE WELL | | | <u> </u> | | |
| WITH "X" IN | 4 DEPTH OF COMPLETED WEI | | | | (decimal degrees) |
| SECTION BOX: | Depth(s) Groundwater Encountered: 1) | | | | (decimal degrees) |
| N | WELL'S STATIC WATER LEVEL | 2) | | | |
| | below land surface, measured on (mo-day-yr). 5-/3 GPS (unit make/model: | | | | , |
| NW NE | above land surface, measured on (mo | o-day-yr) | (WAAS enabled? Yes No) | | |
| | Pump test data: Well water was | | | Survey 🔲 Topograph | hic Map |
| W | after hours pumping | gpm | ☐ Online | e Mapper: | |
| swse | afterhours pumping | gpm | | | |
| <u> </u> | Estimated Vield of Comm | | | | ☐ Ground Level ☐ TOC |
| S | Bore Hole Diameter: | | | | S |
| 1 mile Other | | | | | |
| 1. Domestic: | 5. ☐ Public Water Supply: well I | n | 10 T Oil Fig | ild Water Cumply Long | in . |
| ☐ Household | 6. ☐ Dewatering: how many well | ls? | | : well ID | e |
| Lawn & Garden | 7. Aquifer Recharge: well ID. | | | ☐ Uncased ☐ Geo | |
| Livestock | 8. Monitoring: well ID | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | al: how many bores?. | |
| 2. ☐ Irrigation 3. ☐ Feedlot | 9. Environmental Remediation: w | | | Loop Horizontal | |
| 4. Industrial | ☐ Air Sparge ☐ Soil Va☐ Recovery ☐ Injection | apor Extraction | | | harge |
| 4. ☐ Industrial ☐ Recovery ☐ Injection 13. ☐ Other (specify): | | | | | |
| Water wall diginfected? If the I No | | | | | |
| 8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded | | | | | |
| Casing diameter | | | | | |
| Casing diameter | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | |
| ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ FVC ☐ Other (Specify) | | | | | |
| 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: | | | | | |
| Nearest source of possible contamination: | | | | | |
| ☐ 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 □ Off Well/Gas Well □ Other (Specify) □ Other (Specify) □ Other (Specify) □ Other (Specify) | | | | | |
| Direction from well? | | | | | |
| 10 FROM TO | LITHOLOGIC LOG | FROM | | | LUGGING INTERVALS |
| 0 20 | Clay | | | | |
| | | | | | |
| 20 25 | Sand | | | | |
| 3 6 110 | 121.001.04 | | | | |
| 25 40 | 13/We Clay+Sha | -18 | | | www.anananananananananananananananananan |
| 40 42 | Water | Notes: | | APPARAMENTAL CONTRACTOR CONTRACTO | ALEXANDER / A |
| 10 2 | vice cc. | Tiotes. | | | |
| 42 50 Blue Shale | | | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed or acconstructed or appropriate of the constructed or appropriate or appropr | | | | | |
| under my jurisdiction a | and was completed on (mo-day-year) intractor's License No This | 7 /3. and th | nis record is tru | ie to the best of my k | cnowledge and belief. |
| Kansas Water Well Col | intractor's License No. This is of Sac Aby U.S. | s Water Well Reco | rd was comple | ted on (mo-day-year |) 519-13 |
| | | | | | |
| INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your ecords. 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.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 9/10/2012 | | | | | |