1 LOCATIO	N OF WATER	WELL:		<u> </u>	ELL RECUI	(D FOIIII		on Number	Township Num	ber Ra	nge Number	r
County:	Lyc	ns	SE	1/4	SE 1/4	SW	1/4	15	т 19	S R	المد	E
Distance and	direction from	nearest t	own or city stre	et addres	s of well if l	ocated with	in city?					
	mmercial S	The second secon	or any activity and the second second second second	4.4	<del> </del>	<del></del>	<del></del>					
	WELL OWNER										and the same of the same of	
	iress, Box#				•				Board of Agricult		Vater Resou	irces
City, State, Z	IP Code	<b>ATON WIT</b>	oria, KS 66801				· · · · · · · · · · · · · · · · · · ·	Application Number:				
3 AN "X" IN	SECTION BO		4 DEPTH	OF COM	IPLETED W	ELL	29.10	ft. ELE	/ATION:	1122.49 (T	OC)	]
T T			Depth(s) G	roundwat	er Encounte	red 1		ft	. 2	ft. 3		ft.
	-NW		WELL'S S	TATIC WA	TER LEVE	_ 20.	<b>64</b> ft. b	elow TOC	measured on mo/day	/yr	09/24/13	
				Pump tes	st data: W	ell water w	as	f	t. after	hours pumping		gpm
₩ W		-	E Est. Yield		apm: W	ell water w	as	1	t after	hours pumping	(	apm
ī			Bore Hole	Diameter	8.25	in. to	30		ft. and 8 Air conditionir 9 Dewatering	in. to	. ė	ft.
	sw	SE	WELL WA	TER TO E	SE USED AS	5: 5 Pub	lic water su	pply	8 Air conditionir	ng 11 Injecti	ion well (Specify bel	low)
<b>↓ I</b>	x		0 100	mesuc	o reed lot	9 Oil I	eid water s	uppiy	c) 10 Monitoring w	12 Other	(opecity bei	JOW)
· -	S											
				mical/bac	teriological :	sample sub	mitted to D		Yes No X			vas
E TYPE OF	- DI ANIK OA O	NO LIGHT	submitted	<u></u>	*************	<del>-1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 </del>	0 0		ter Well Disinfected	The second secon		
	BLANK CASI								CASING JOINT		Clamped	
1 Ste			P (SR)		Asbestos		9 Other (	specity bein	w)	Welded	Flush	-
2 PV	NAME OF BRIDE	4 ABS			' Fiberglas					Threaded	Flubii	
Blank casing	diameter	2	in. to	14.1	ft., Dia		in. to	)	ft., Dia	in, to	CCU 40	ft.
					weight	U.	/U3 	lbs./ft.	Wall thickness or ga	auge No.	3CH. 40	
	CREEN OR PE				· <del>Filippes (</del>	-	L7	PVC	10 Asbest	tos-cement		
1 Ste 2 Bra	-0.7	3 Sta	Inless steel	5	Fibergias	5 #10	8 1	RMP (SR)	11 Other 12 None i	(specity)	<u></u>	
	ss R PERFORAT				5	Gauzed	wrapped	ADO	8 Saw cut	useu (opermole) 11 No	ne (open ho	ole)
	ntinuous slot		3 Mill slot						9 Drilled holes			
2 Lou	vered shutter	5.00	the state of the s			Torch c			10 Other (specify	)		
	ERFORATED				.1 ft.	to	29.1	ft.	From	ft. to		ft.
									From			
GR/	AVEL PACK IN	NTERVAL:	S: From	1;	<b>3</b> ft.	to	30	ft.	From	ft. to		ft.
			From		ft,			ft.	From			
6 GROUT	MATERIAL:	1 Ne	at cement	2 Ce	ement grout		3 Bent	onite	4 Other			
									ft. From			
	nearest source					غدمد غدمد خدما مرضا	Walasa Walan 1991 1991	10 Lives	stock pens	14 Abandone	d water well	
I The state of the				4 Lateral lines 7 Pit privy								
2 Sev	5 Cess p	5 Cess pool 8 Sewage lagoon										
1	tertight sewer		6 Seepa	ge pit	. 9	Feedyard			cticide storage		والمراث بإداعات بالديدي	أباد ما ما ما
	m well? No	1 - 11, 2 2, 110, 111, 111 11.				<u></u>			/ feet? 60	58018 NITESY	110	ا جد حد
FROM 0	4.5	CODE	Topsoil / C	ITHOLOG	SIC LOG	and the second	FROM	то	PLUC	GGING INTERV	ALS	<del></del>
4.5	5.5		Silty Clay	mavei	<u> </u>	<del></del>	.,	<u> </u>	Admire existing	<u>, ; </u>	<u></u>	<u></u>
5.5	8		Silt with C	lav	<del></del>		<del></del>					
8	18.5		Clay									
18.5	23.5		Silt with C								<u> </u>	
23.5	26.5		Sand, fine					ļ			<u></u>	
26.5 27	27		Gravel, coa									
21	30		Sand, fine	grainea,	with siit						<del> </del>	<del> </del>
			, 11 or 14 o	<u></u>		· · · · · · · · · · · · · · · · · · ·	<del></del>			<u></u>		· · · · · · · · · · · · · · · · · · ·
			<u> </u>	<del></del>	<u> </u>	<u></u>	<del></del>		GPS:	<u> </u>		
					<del></del>				Latitude: N 38			
								1 202 202 202	Longitude: W			
7 CONTR	ACTOR'S OR	LANDOW	NER'S CERTI			r well was	(1) construc	ted, (2) rec	onstructed, or (3) plug	gged under my ju	risdiction and	d was
completed of	on (mo/day/yr)	12161		09/18/	13				true to the best of m			
	Contractor's L		•		531		This W	/ater Well R	ecord was complete	đ on (mo/day/yr)	10/28	/13
under the b	usiness name	of	GSI	Engine	eering, L	LC	by	(signature)	141 14			
INSTR	UCTIONS: Ple	ase fill in b	lanks and circle	the correct	answers. Se	end three co	pies to Kans	as Departme	ent of Health and Enviro OWNER and retain or	onment, Bureau of	Water, 1000	\$.W
Jacksc	11 UL, OIC. 42U,	i upera, N	111000 UUU IZ- 13	or relept	1011C. 313-29	U-UU4U, DB	IN OHE LO VV	TILIL VVELL	OVVINEIL GIRLIGIGIO	ic ioi your records	·	