| WATER WELL P | | Form W | | | ision of Water | | | | |
|--|---|--|-------------------------------|--------------------|--|-------------------------------------|------------------------------|--|--|
| Original Record | | | in Well Use | | urces App. No | | Well ID | | |
| 1 LOCATION OF W | | L: | Fraction | // Sec | tion Number | | | | |
| County: / Max | cipn, | | 1/4 Ny 1/4/Nw 1/4 | (VE/4) | 5- | $\frac{T \sqrt{S}}{S}$ | $R / E \square W$ | | |
| 2 WELL OWNER: 1 | ast Name: | th | First: Lloyh | | | here well is located | | | |
| | | | | | | | | | |
| Address: 278 /30th | | | | | | | | | |
| City: Newton State 2 ZIP6///4 | | | | | | | | | |
| 3 LOCATE WELL | 4 DEPTU | LOE COMI | DIETED WELL. | 571 0 | 5 Latitud | la. | (decimal decrees) | | |
| WITH "X" IN | | | | | | | (decimal degrees) | | |
| SECTION BOX: | | 2) ft. 3) ft., or 4) \(\subseteq \subseteq \text{Dry Well} \) | | | | Longitude: | | | |
| N | WELL'S STATIC WATER LEVEL: | | | | Source for Latitude/Longitude: | | | | |
| X | below land surface, measured on (mo-day-yr) | | | | | |) | | |
| above land surface, measured on (mo-day-yr) | | | | | | | | | |
| Pump test data: Well water was ft. | | | | | ☐ Land Survey ☐ Topographic Map | | | | |
| W E | Well water was ft. | | | | | ☐ Online Mapper: | | | |
| SWSE after hours pumping | | | | | | | | | |
| | Estimated Yield: 20. p. gpm | | | | | | ☐ Ground Level ☐ TOC | | |
| S | | | | | | | SPS | | |
| 1 mile mile in. to ft. | | | | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | |
| 1. Domestic: 5. Public Water Supply: well ID | | | | | | 10. ☐ Oil Field Water Supply: lease | | | |
| ☐ Household 6. ☐ Dewatering: how many wells? | | | | | 11. Test Hole: well ID | | | | |
| Zawn & Garden 7. ☐ Aquifer Recharge: well ID ☐ Livestock 8. ☐ Monitoring: well ID | | | | | | | | | |
| ☐ Livestock 2. ☐ Irrigation 8. ☐ Monitoring: well ID | | | | | 12. Geothermal: how many bores? | | | | |
| 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extra | | | | | | | charge Inj. of Water | | |
| 4. Industrial | | Recovery | ☐ Injection | | | | | | |
| Was a chemical/bacteriological sample submitted to KDHE? Yes You If yes, date sample was submitted: | | | | | | | | | |
| Water well disinfected? Ares 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 ☐ PVC ☐ Other (Specify) | | | | | | | | | |
| ☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) SCREEN OR PERFORATION-OPENINGS ARE: | | | | | | | | | |
| Continuous Slot | | | | | | | | | |
| ☐ 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 Bentonite Other | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | |
| 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 □ Oil Well/Gas Well | | | | | | | | | |
| Other (Specify) | | | | | | | | | |
| Direction from well? Distance from well? 100 th. | | | | | | | | | |
| 10 FROM TO | I | ITHOLOG | IC LOG | FROM | TO L | ITHO. LOG (cont.) or | PLUGGING INTERVALS | | |
| 0 10 | Clay | | | | | | | | |
| 10 22 | FINE. | Sand | WithCla | e y | | | | | |
| X | 0 | | | <u> </u> | | | | | |
| 23 41 | FINE | to m | ec San | Д | | | | | |
| | 12 , | | | ļ | | | | | |
| 41 50 | DIVE | Sha | 10 | | | | | | |
| | | | | Notes: | | | | | |
| | | | | 4 | | | | | |
| 11 COMPDACEONS | OD I AND | ANAIR DIG | CEDTIEICATION | I. This | wall was a | Sonotmusted I | networked on Daliana 1 | | |
| 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) | | | | | | | | | |
| Kansas Water Well Contractor's License No | | | | | | | | | |
| under the business name of Back Th. V. Q. Dr. 11. 114 | | | | | | | | | |
| 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 | | | | | | | | | |
| | ne copy to WATER | WELL OWNER | R and retain one copy for you | ır records. Sabmit | fee of \$5.00 for ea | ch constructed well along with | h one (white) copy to Kansas | | |
| | ne copy to WATER ealth and Environm | R WELL OWNER ent, Bureau of W | R and retain one copy for you | ır records. Sabmit | fee of \$5.00 for ea suite 420, Topeka, | | h one (white) copy to Kansas | | |