WATER W	Division of Water									
☐ Original Record ☐ Correction ☐ Change in Well Use				se	Resources App. No.			Well ID		
1 LOCATIO	1 LOCATION OF WATER WELL: Fraction				Section Number			Township Numb		nge Number
County:	NW4 30 T 25 S R 25 ME □ W									
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance a										
Business: Address: Address: Address: Address: Address: Address: Business: Address:										
Address:					%500 ₺	ect Nag	rth a	nd 100 te	et we	st of
City:		State:	ZIP:		N. Nat	ional A	tve.	and Elm	St. F	t. Scott K
3 LOCATE V	VELL A D	EDTH OF	COMDI ETED	WEIT.	50			37.84		
WITH "X"	IN Dont	b(s) Groundy	COMPLETED vater Encountered		<i>⊶</i> 1	. 5 Lati	tude:	- QU 7.05	10 L	.(decimal degrees)
SECTION I	Dry Well									
N	ft.									
below land surface, measured on (mo-				on (mo-day-	yr)					nin etreK
NW1	NE 🔲 a					. 194		AAS enabled?		
	Pump	Pump test data: Well water was ft			t.		Land Su	Survey Topographic Map		
W	E	afterhours pumping			gpm		Online N	ne Mapper:		
Well water was					l.			000		
	Fetim	Estimated Vield: gram				6 Elevation: ft. IX Ground Lev				Level TOC
S	Bore	Bore Hole Diameter: 8.5 in. to 50			ft. and	and Source: Land Survey GPS Topographic Maj				opographic Map
1 mile-	to				ther					
7 WELL WATER TO BE USED AS:										
1. Domestic:		5. 🔲 Publi	c Water Supply:	well ID		10. 🗆 C	Dil Field	Water Supply: 16	ase	
☐ Household 6. ☐ Dewatering: how many wells?										
☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID										
Livestock 8. Monitoring: well ID								how many bores		
3. Feedlot	2. ☐ Irrigation 9. Énvironmental Remediation: well ID 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex					a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
4. Industrial		Reco		Injection	action	13 🗆 (Other (sn	ob 🖂 Surface Di	scharge _	inj. of water
_ , (
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:										
2 TVPF OF CASING HISED: IT Steel MIDVO IT Other										
Casing diameter 2 in to 10 ft Diameter in the 10 ft Diameter in th										
8 TYPE OF CASING USED: Steel MPVC Other JOINTS: Glued Clamped Welded Threaded Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Weight Wall thickness or gauge No. 2014.										
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										
GD AV	COKALED IN I	ERVALS:	From	1. to 50	II., From .	π. π. i	to	π., From	ft. to	tt.
GRAVEL PACK INTERVALS: From										
Grout Intervals:	From	ft to	A From	Dui Di Be	ft to	f From	, —	ft to —	·····································	
Nearest source	of possible contai	mination:	6 11., 1 10111 .	•••••		16., 1 101	1,	It. W	11.	
Septic Tanl		□ Lateral	Lines	Pit Privy		Livestock P		☐ Insection	ide Storage	
☐ Sewer Line		Cess Po		Sewage Lag	goon 🔀	Fuel Storage	e	☐ Abando		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well										
☐ Other (Specify)										
	TO		Dista	nce from we	FROM	TO			DITICODI	CINTERVALO
IU PROM	10	LITHO	LUGIC LUG		FRUM	10	LITH	D. LOG (cont.) or	FLUGGIN	JINIEKVALS
				à						
										
	Notes:	28:								
					1					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION; This water well was X constructed, \Box reconstructed, or \Box plugged										
under my juriso	liction and was	completed o	n (mo-day-year	r) 1.0/5	and	this record	is true	to the best of my	knowled	ge and belief.
under my jurisdiction and was completed on (mo-day-year)										
under the business name of Below (storned Surface, Inc. Signature Mail 1 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,										
ITIGHT I WILL	copy mong with a	01 95.00 10	constitucted	IV. Kdli	Department	or ricatili allo	PHAUDII	mont, Durcau or Wa	, UW 13 3	Cuon,
1000 SW	Jackson St., Suite 42	20. Topeka, Ka	nsas 66612-1367	Mail one to V	Vater Well Own	er and retain a	one for vo	our records Telepha	ne 785-296.	5524