WATER WELL RI		W W C-5		sion of Water		Vell ID MVV15	
Original Record		ge in Well Use		urces App. No. tion Number	Township Number	Range Number	
1 LOCATION OF WA	ATER WELL:	Fraction NW 1/4 NW 1/4 NE 1/2	1	2	T 26 S	R 5 ■ E □ W	
County: Butler							
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and							
Business: KDHE direction from nearest town or intersection): If at owner's address, check here:							
Address: 201 E. Central							
City: Topeka State: KS ZIP: 66612 El Dorado, KS 67042							
3 LOCATE WELL					27.04740		
WITH "X" IN	4 DEPTH OF COM	APLETED WELL:	20 ft.	5 Latitude: 37.81718(decimal degrees)			
SECTION BOX:	Depth(s) Groundwater	Encountered: 1)	1.4 ft.	Longitude: 96.84808 (decimal degrees)			
N	2) ft.	3) ft., or 4)	Dry Well	Horizontal Datum: ■ WGS 84 □ NAD 83 □ NAD 27			
	WELL'S STATIC WA	TER LEVEL:			Source for Latitude/Longitude:		
	below land surface	, measured on (mo-day	-yr)12/12/18	GPS (unit make/model:)			
NW NE		, measured on (mo-day		(WAAS enabled? ☐ Yes ☐ No)			
	Pump test data: Well v			■ Land Survey □ Topographic Map			
W	1	s pumping		☐ Online Mapper:			
SW SE		water was					
3W 3E	after hours pumping gpm				.n. 1287.61 ⊕ ⊏	Cround Level TOC	
	Estimated Yield:gpm Bore Hole Diameter:8.5 in. to20 ft. and				6 Elevation: 1287.61		
S	Bore Hole Diameter:8.5 in. to29 ft. and			Other			
mile		in. to	ft.	I	Otner		
7 WELL WATER TO BE USED AS:							
1. Domestic:		ater Supply: well ID			ield Water Supply: lease		
☐ Household	6. ☐ Dewatering: how many wells?				11. Test Hole: well ID		
☐ Lawn & Garden	7. ☐ Aquifer Recharge: well ID						
☐ Livestock	8. ■ Monitoring: well ID						
2. ☐ Irrigation	9. Environmental Remediation: well ID				a) Closed Loop 🔲 Horizontal 🔲 Vertical		
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extraction					b) Open Loop Surface Discharge Inj. of Water		
4. ☐ Industrial	☐ Recovery	☐ Injection		13. 🔲 Othe	r (specify):		
Was a chemical/bacter	iological sample subn	nitted to KDHE?	Ves ■ No	If yes date s	ample was submitted.		
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 diameter 2 in. to 50 ft., Diameter in. to							
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No. 40							
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 ft. to ft., From ft., From ft. to ft.							
GRAVEL PACK INTERVALS: From							
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other							
Grout Intervals: From							
Nearest source of possible contamination:							
☐ Septic Tank	□ Lateral Line	es 🔲 Pit Privy		Livestock Pens	☐ Insecticide	: Storage	
☐ Sewer Lines	☐ Cess Pool	☐ Sewage L		Fuel Storage	☐ Abandone		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well							
☐ Other (Specify)							
Direction from well? We	SĮ	Distance from v				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
10 FROM TO	LITHOLO	GIC LOG	FROM	TO L	ITHO. LOG (cont.) or PL	UGGING INTERVALS	
	Concrete	<u> </u>			· · · · · · · · · · · · · · · · · · ·	_	
0.5 15 S	ilty Clay (CL), brown	to reddish brown					
	ilty Clay (CL), tan						
	7 (//						
			-				
			1				
	Notes:						
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) 11/28/18 and this record is true to the best of my knowledge and belief.							
Kansas Water Well Contractor's License No. 585							
under the business name	of Associated Envi	ronmental.lnc	Si	gnature		ON TO G	
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,							
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.							
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015							

