WAIER WELL R	ECOIL						urces, App. No.			
1 LOCATION OF W.	ATER WELL:	Fraction	NW 1/	SW // S	ection N	umber	Township Nu	ımber	Range N	lumber
Distance and direction for	rom nearest town	or city stree	et address of	fwell if C	lobel Pos	itioning	System (decir	mal deor	ees min o	f A digits)
County: Montgomery SE ½ NW ½ SW ½ 30 T 32 S R 16 E  Distance and direction from nearest town or city street address of well if located within city? 525 N. Pennsylvania Ave, Independence, KS  Global Positioning System (decimal degrees, min. of 4 digits)  Latitude: N °37.22872  Longitude: W °95.70683										
2 WATER WELL OWNER: Loren Barnett (Dakota Leasing) Elevation: RIM: 788.73 TOC: 788.44										
RR#, St. Address, Bo	VIVEN. LUICII D	511	.ota Leasing			NAVD88				
City State 7IP Code	iλπ . PO Don	. J.14 e. MO 658	36				1ethod: legal s	survey	*	
City, State, ZIP Code : Carthage, MO 65836 Data Collection Method: legal survey  3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 9.10 ft.										
LOCATON MW10										
t .	Donth(a) Groun	dwater Eng	ountered 1			ft 2		ft 3		£
WITH AN "X" IN	Depth(s) Groun	dwater Elic	D I EVEI	( AF A	holow lo	11. ∠ dov=fo		n molde		/1.4/12
SECTION BOX:										
N Pump test data: Well water was ft. after hours pumping gpm  Est. Yield gpm: Well water was ft. after hours pumping gpm										
	Est. Yield	gpm:	Well water	was	n.	after	nours	pumpu	ng 	gpm
NWNE-	WELL WATER	TO BE U	SED AS: 5	Public wat	er supply	/ 8 A11	r conditioning	II In	jection we	) II
W   1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)										
2 Irrigation 4 Industrial / Domestic (lawn & garden) (U)Monitoring well										
X sw se										
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs										
Sample was submitted Water Well Disinfected? Yes No X										
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped										
1 Steel 3 I	RMP (SR) 6	A shestos-C	ement	9 Other (s	necify be	low)		Welded	d	
(2) PVC 4 A	ABS 7	Fiberglass						Thread	.ed	X
Blank casing diameter	2 in. to	2.10 f	t Dia	ir	1. to	ft.,	Dia	in.	to	ft.
2 PVC 4 ABS 7 Fiberglass Threaded X  Blank casing diameter 2 in. to 2.10 ft., Dia in. to ft., Dia in. to ft.  Casing height below land surface 0.29 ft., Weight Ibs./ft. Wall thickness or gauge No.										
TYPE OF SCREEN OR PERFORATION MATERIAL:										
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify)										
TYPE OF SCREEN OR PERFORATION MATERIAL:  1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify)  2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)										
ISCREEN OR PERFORATION OPENINGS ARE:										
1 Continuous slot (3) Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)										
1 Continuous slot 3 Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)  SCREEN-PERFORATED INTERVALS: From 2.10 ft. to 9.10 ft. From ft. to ft.										
SCREEN-PERFORATE	DINTERVALS:	From	2.10	ft. to	9.10	n. Fro	om	It. to	<b>,</b>	tt.
		From		ft. to		ft. Fro	om	ft. to	)	ft.
GRAVEL PACK	INTERVALS:	From	2	ft. to	9.40	_ ft. Fro	om	ft. to	)	ft.
		From		ft. to		_ ft. Fro	om	ft. to	) 	ft.
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-1 ft										
Grout Intervals From 1 ft. to 2 ft. From ft. to ft. From ft. to ft.										
What is the nearest source of possible contamination:										
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify										
2 Sewer lines	5 Cess pool			11) Fuel sto			indoned water		below	)
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well										
Direction from well? E How many feet? ~200										
FROM TO		OGIC LOC	<u>}</u>	FROM	TO		PLUGGIN	<u>G INTE</u>	RVALS	
	own soft silty cla	<u>y</u>			ļ	<del></del>				
	rd olive shale				<del> </del>	<del> </del>				
9 9.4 Lin	nestone bedrock				<del></del>					
					<del> </del>	<del> </del>				
				<del>                                     </del>		<del> </del>				
										~~~
						Flushn	nount waiver	from B	OW	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged										
under my jurisdiction and was completed on (mo/day/year) 1/13/2013 and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No. 757 . This Water Well Record was completed on (mo/day/year) 2/5/2013										
				iter Well Red	cord was c	ompleted	on (mo/day/ye	ar) <u>2/5</u>	5/2013	
under the business name of				by (signatu						
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for										
Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.										