| WATER WELL R | | | WWC-5 | | sion of Water | 1 | LFI-7 | 'S | |
|---|--|---|---|--|---|--|-----------------------|------|--|
| Original Record | | | | | urces App. No | | Well ID | | |
| 1 LOCATION OF W County: MONTGO | ATER WEI | LL: | Fraction SE 1/4 SW 1/4 NE 1/2 | i | tion Number 8 | Township Numb | er Range Numbe | | |
| | | | | | | | | | |
| 2 WELL OWNER: L Business: PROJEC | ast Name: NAVIGAT | OK | First: | Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: | | | | | |
| Address: 15990 N BARKERS LANDING RD | | | | | | | | | |
| Address: SUITE 32 | | TV | am 77070 | | MARTIN ST. AND N. SCHOOL ST. IN CHERRYVALE KS | | | | |
| City: HOUSTO 3 LOCATE WELL | | State: TX | ZIP: 77079 | | | | | | |
| WITH "X" IN | | | 1PLETED WELL: | | | | B(decimal deg | | |
| SECTION BOX: | | | Encountered: 1) | | | | | | |
| N | | | 3) ft., or 4) TER LEVEL: | | | | | | |
| | | | , measured on (mo-day | | GPS (unit make/model: GARMIN 210 | | | | |
| NWNE | above 1 | land surface, | , measured on (mo-day | /-yr) | (WAAS enabled? ☐ Yes ■ No) | | | | |
| | | | vater was | | ☐ Land Survey ☐ Topographic Map | | | | |
| W | after | after hours pumping gpm Well water was ft. | | | | ☐ Online Mapper: | | | |
| SW SE | after hours pumping gpm | | | | | 011 | | | |
| | | | 4.5 in. to 15 | | | | . 🖪 Ground Level 🔲 | | |
| S | Bore Hole | Diameter: | 4.5 in. to 15 | ft. and | Source | | GPS Topographic | | |
| 1 mile | | | in. to | N. | | U Other | | | |
| 7 WELL WATER TO | | | star Cupply well ID | | 10 🗆 🔾 | Field Water Supplem 1 | aaca | | |
| ☐ Household | | | ater Supply: well ID ag: how many wells? . | | | lole: well ID | ease | | |
| Lawn & Garden | 7. | Aquifer R | echarge: well ID | | Cased Uncased Geotechnical | | | | |
| Livestock | ☐ Livestock 8. Monitoring: well IDLF.I-7 | | | | 12. Geothermal: how many bores? | | | | |
| 2. Irrigation | . 🗌 Irrigation 9. Environmental Remediation: well ID | | | | a) Closed Loop Horizontal Vertical | | | | |
| 3. ☐ Feedlot 4. ☐ Industrial | | 」 Air Sparge ☐ Recovery | e Soil Vapor | Extraction | | | ischarge Inj. of Wa | | |
| | | _ | | 1.7 | | | | | |
| Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted: | | | | | | | | | |
| Water well disinfected? ☐ Yes No 8 TYPE OF CASING USED: ☐ Steel PVC ☐ Other | | | | | | | | | |
| Casing diameter | | | | | | | | | |
| Casing height above land surface 48 in. Weight 1 lbs/ft. Wall thickness or gauge No. SCH 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 | | | | | | | | | |
| □ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) | | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From .10 | | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | |
| Septic Tank | | t ion: Lateral Line | es | П | Livestock Per | ns 🗆 Insecti | cide Storage | | |
| Sewer Lines | _ | Cess Pool | ☐ Sewage L | _ | Fuel Storage | | oned Water Well | | |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well | | | | | | | | | |
| Other (Specify) LA Direction from well? W | MDEILT | · · · · · · · · · · · · · · · · · · · | Distance from | 100 | | • | | | |
| 10 FROM TO | | LITHOLO | | FROM | | LITHO LOG (cont.) o | r PLUGGING INTERV | ZIAV | |
| | CLAY | LITHOLO | GIC LUG | FRON | 10 | LITTIO. LOG (CORL.) 0 | LI LUGGING INTERV | ALS | |
| | | | MEAN ALL COMES TO THE RESIDENCE OF THE COMES | | | and the fact of the second | | | |
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| | | | | Notes: | | | | | |
| | | | | | | | | | |
| 11 CONTRACTORIS OR LANDOWNER'S CERTIFICATION. This was a wall was a second and a second product of the second | | | | | | | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, or plugged under my jurisdiction and was completed on (mo-day-year) 3/28/2018 and this record is true to the best of my knowledge and belief. | | | | | | | | | |
| Kansas Water Well Contractor's License No778. This Water Well Record was contributed on (no-day-car) 120.18 | | | | | | | | | |
| under the business name of IERRACON CONSULTANTS INC Signature | | | | | | | | | |
| Mail I 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.kdhcks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015 | | | | | | | | | |
| visit us at http://www.kdhck | s.gov: waterwell | muex.ntm | | NOA 024-12 | 14 | | ALLISCU // IU/201 | | |