	WELL F			WWC-5		Di	vision of Wat	er			MW10	
	l Record			e in Well Use			ources App. 1			Well ID		
1 LOCATION OF WATER WELL:				Fraction		ection Number   Township Nur						
	y: Cowley			NE' NW'								
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and												
	: Caseys #				Ì	direction from	nearest town o	r inte	rsection): If at owne	r's address,	check here:	
Address: 219 W. 9th St. Address: 218 W. 9th St.												
City:	_Winfield		State: KS	ZIP: 67156		Winfield, K						
3 LOCAT		1										
WITH		4 DEPTH	OF CON	APLETED W	ELL: ,	20 f	t.   5 Latit	ude:	37.2403	34	.(decimal degrees)	
SECTION BOX: Depth(s) Groundwater Encountered: 1)ft. Longitude: 96.99947 (d.										.(decimal degrees)		
1			Horiz	onta	Datum: WGS 8	4 🔳 NAD	83 🗆 NAD 27					
WELL'S STATIC WATER LEVEL:14.60 ft. below land surface, measured on (mo-day-yr)11/13							Source	Source for Latitude/Longitude:				
.'	'-		above land surface, measured on (mo-day-yi					☐ GPS (unit make/model:			)	
NX	NE	Pump test de	ata. Well v	water was				(WAAS enabled?  Yes No)				
w	s pumping			Land Survey Topographic Map								
1 "1 '	vater was ft.				Online Mapper:							
after hour				s pumpinggpm				4400.00				
Estimated Yield:			gnm			6 Elevs	6 Elevation: 1126.86 ☐ Ground Level TOC					
S Bore Hole Diameter:			8.5 in. to 20 ft. and			Source	Source: Land Survey GPS Topographic Map					
1 mile  in. to ft. Uother												
7 WELL WATER TO BE USED AS:												
1. Domestic	-			ater Supply: wel			10. 🗆 O	il Fie	eld Water Supply: 1	ease		
	Household 6. Dewatering: how many wells						11. Test	Hole	: well ID			
	□ Lawn & Garden       7. □ Aquifer Recharge: well I         □ Livestock       8. ■ Monitoring: well ID						Cased Uncased					
. —								12. Geothermal: how many bores?				
3. Feedlo	2. ☐ Irrigation 9. Environmental Remediation: well ID 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extr							a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
4. Indust			Recovery			ZATIACHOII						
Was a chemical/bacteriological sample submitted to KDHE?  Yes No If yes, date sample was submitted:												
Water well disinfected?  Yes No  CASPIC IONIES TO CASPIC												
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other												
Casing diameter 2 in. to 20 ft., Diameter in. to ft., Diameter in. to ft., Diameter in. to ft.  Casing height above land surface in. Weight in. Weight wall thickness or gauge No. Schedule 40												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
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												
GRAVEL PACK INTERVALS: From 8 ft. to 20 ft., From ft. to ft., From ft. to ft., From ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From												
Nearest source of possible contamination:												
☐ Septic			Lateral Line				Livestock Pe		☐ Insecti	cide Storage	;	
☐ Sewer			Cess Pool	☐ Sew			Fuel Storage			oned Water		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
☐ Other (Specify)												
10 FROM	TO TO		ITHOLOG		HOIH W	FROM	TO		HO. LOG (cont.) or		C INTEDMATE	
		Topsoil, dark		GIC LOG		PROM	10	LII	110. LOG (cont.) 01	LLOGGIN	UNIEKVALS	
0.5				to red brown								
14		Silty Clay (Cl				<del>                                     </del>	1					
17	20	CHLY GAIRG (S	VVI, DIOW				t					
	<del>  </del>					<b>+</b>	<del> </del>					
	<del>                                     </del>					<del> </del>						
	<del>                                     </del>					Notes:	L					
11065.												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
under my i	urisdiction a	nd was compl	eted on (m	no-day-vear) 1	1/12/1	8 and	this record	is tr	ie to the best of m	v knowled	ge and belief.	
under my jurisdiction and was completed on (mo-day-year) 1.1/12/18 and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No. 585												
under the b	ousiness nam	e of Associa	ted Envir	conmental.Inc.		S	ignature		- Durchas	Cohes	·	
under the business name of Associated Environmental.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, GWT'S 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.												
				66612-1367. Maii				one fo	r your records. Teleph			
Visit us at http	p://www.kdhek	s.gov/waterwell/ii	ndex.html			KSA 82a-12	212			Revised	7/10/2015	

