WATER WELL R		Form W			sion of Water			MW4	
Original Record			ı Well Use		urces App. No		Well ID		
1 LOCATION OF W			raction		ion Number			ige Number	
County: LABETTE			W14 SW14 SE14						
2 WELL OWNER: Last Name: HARAUGHTY First: VICKY Street or Rural Address where well is located (if unknown, distance and									
Business: Address: 115 E. 4TH ST.									
Address:									
City: ALTAMO					·				
3 LOCATE WELL	4 DEPTH	OF COMP	LETED WELL:	15 քե.	5 Latitud	le: 37,1932	26	(decimal degrees)	
WITH "X" IN SECTION BOX:			countered: 1)		Longit	Longitude: 95.29954 (decimal degrees)			
SECTION BOX:			ft., or 4) 📮			tal Datum: WGS 8			
	WELL'S ST	IATIC WATE	R LEVEL:3.5	.> ft. 11/15/17	Source for Latitude/Longitude:				
	below I	below land surface, measured on (mo-day-yr)1/15/17. above land surface, measured on (mo-day-yr)				☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)			
NW NE		Pump test data: Well water was ft.				■ Land Survey ☐ Topographic Map			
w		after hours pumping gpm				Online Mapper:			
SW SE		Well water was ft.							
	1	after hours pumping gpm 6 Elevati Estimated Yield:gpm					. Ground	l Level 📺 TOC	
S		Bore Hole Diameter: in. to ft. and				6 Elevation: .905.00ft. Ground Level TOC Source: Land Survey GPS Topographic Map Other			
mile	in. to ft.								
7 WELL WATER TO BE USED AS:									
1. Domestic:			Supply: well ID		10. 🔲 Oil	Field Water Supply: 1	ease		
☐ Household	6. Dewatering: how many wells?				11. Test Hole: well ID				
☐ Lawn & Garden ☐ Livestock					☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?				
2. Irrigation	9. Environmental Remediation: well ID				a) Closed Loop Horizontal Vertical				
3. Feedlot	<u> </u>					b) Open Loop Surface Discharge Inj. of Water			
4. Industrial] Recovery	☐ Injection		13. 🔲 Oth	er (specify):			
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									
☐ 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 . 5									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other CONCRETE									
Grout Intervals: From									
Nearest source of possible contamination:									
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage									
Sewer Lines	_	Cess Pool	Sewage Lag		Tuel Storage	_	oned Water		
□ Watertight Sewer Lines □ Seepage Pit □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)									
Direction from well?									
10 FROM TO	I	ITHOLOGIC	LOG	FROM	TO L	ITHO. LOG (cont.) or	PLUGGIN	G INTERVALS	
	FOPSOIL								
	SILTY CLAY								
8 15	MUDSTONE								
				 					
				Notes:					
Trutes.									
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) .1.1/1/17									
Kansas Water Well Contractor's License No. 585									
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Burdar 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				KSA 82a-121				7/10/2015	

