1 DOZATION OF WATER WELL Fraction NE x SM x S			WA	ATER WELL REG	CORD	Form	wwc	:-5 KS	SA 82a-12	212 ID I	No						
Description	1 LOCAT	ION OF WA										Township Number			Range Number		
Distance and disection from nearest town or city steel address of well if located within city? 3 /4 miles South of Circleville 2 WATER WELLOWNER Stephanie Nicol RR S. Address bx * 6880 - 246th Rd Circleville, Ks. 66416 Board of Agriculture, Division of Water Resources Application Number: Applic	County:	Jackso	n	NE ½	4 SW	1/4	SW	1/4	2	9	1	-		1	-		
22 WARER WELL OWNERN Stephania Nicola Republished								ted within	city?			· · · · · · · · · · · · · · · · · · ·					
BRP St. Address, Box # : 6880 - 246th Rd Board of Agricular, Division of Water Resources (C.) State, 21P Cock C.	3/41	miles v	west and	3/4 mil	es s	outh	of	Circ	clevi	lle							
Chy, State 2/P Coldo Circleville, Rs. 66416 Application Number: Application Numb	2 WATER	R WELL OW	NER: Ste	phanie N	Vicol												
City State 2P Code Circleville, Ks. 66416 Application Number:	 RR#. St. A	ddress. Box	600	-								Board of	Aaricultur	e. Division	of Water R	esources	
An X* IN SECTION BOX	City, State,	ZIP Code	Cir	clevill ϵ	e, Ks	. 66	416	•				Application	on Numbe	er:			
An X* IN SECTION BOX	3 LOCATE	WELL'S LC	CATION WITH	4 DEPTH OF	COMPLE	TED W	ELL	100		ft. ELEV	ATION:						
Pump test data: Well water was t. after hours pumping gom was the				 Depth(s) Grou	ındwater	Encount	tered.	_ 1		1	ft. 2			ft. 3		ft.	
Pump test data: Well water was t. after hours pumping gom was the		N.		WELL'S STAT	IC WATE	R LEVE	<u>:L1</u>	5	.ft. belov	v land surfa	ace meas	sured on r	mo/day/yr	2-28	-05		
WELLWATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 2 Infigration 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well 10 Monitorin		1		Pu	ump test	data: V	Nell w	ater was		ft.	after		hou	rs pumping	l	gpm	
Second S													gpm				
Was a chemical/bacterological sample submitted to Department? Yes												w)					
Section Sect	w—																
TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 6 Asbestos-Cement 2 PUC. 4 ABS 7 Fiberglass 1 Fiberglass 1 Fiberglass 1 Steel 3 Statistics Stoel 1 Steel 3 Statistics Stoel 2 Brass 4 Galvanized Steel 6 Concrete tile 9 Other (specify below) Wilded 1 Threaded 1 Type Continuous siot 2 Brass 4 Galvanized Steel 6 Concrete tile 9 Other (specify below) Threaded 1 Steel 1 Steel 3 Statistics Stoel 5 Fiberglass 8 RMP (SR) 11 Other (specify) 2 SZ 2 bs. bt. // Walt Michaes or guage No. 25 B. TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Statistics Stoel 5 Fiberglass 8 RMP (SR) 11 Other (specify) 1 None (specify below) 2 None (specify below) 1 N																	
TYPE OF BLANK CASING USED: 3 RMF (SR)	Trad a dictilida bacteriological cample dabilities to Department. Too, if you, morday, yie cample trad												was sub-				
Section Sect																	
Section Sect																	
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded Steel	5 TYPE		ASING USED:		5 Wro	ught iro	n	Ω	Concrete	o tilo		CASING I	OINTS: G	X bouls	Clamper	٠	
2 PVC				R)		•						ASING 0					
Casing height above land surface			, -	,					-		-		T	hreaded			
Casing height above land surface	Blank casis	ng diameter	5	in. to		f	t., Dia	ı .		in. to		ft., [Dia		in. to	ft.	
1 Steel 2 Brass																	
2 Brass	TYPE OF	SCREEN OF	R PERFORATIO	N MATERIAL:								10 A	sbestos-0	Cement			
SCREEN OR PERFORATION OPENINGS ARE: 1 5 Guazed wrapped 2 8 Saw cut 3 Mill slot 2 Louvered shutter 4 Key punched 3 Mill slot 4 5 Drilled holes 5 Drilled holes 5 Drilled holes 5 Drilled holes 6 Screen-Perforated shutter 4 Key punched 7 Torch cut 1 Other (specify) 98 ft.	1 Stee	el				-											
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 1 Continuous slot 4 Key punched 7 Torch cut 10 Other (specify) 98 1.	2 Bras	SS	4 Galvaniz	ed Steel	6 Cor	ncrete til	е		9 ABS			12 N	lone used	(open hole))		
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)	SCREEN	OR PERFOR	RATION OPENIN						11 No	one (open h	nole)						
SCREEN-PERFORATED INTERVALS: From 32 ft. to 10 ft. From ft. to ft.	1 Continuous siot 5 Ivilii siot															44	
SCREEN-PERFORATED INTERVALS: From	2 Lou	vered shutte	r 4 K	• • • • • •	2.2			12				ดวิ่	• ,	9.8	}		
From	SCREEN-I	PERFORATE	ED INTERVALS:	:			ft. to			ft., From	n		f	t. to	· · · · · · · · · · · · · · · · · · ·	ft.	
From	,	2DAVEL DA	CK INTEDWALS	From	23	•••••	ft. to .	100		ft., From	n ~	••••••	t	t. to	• • • • • • • • • • • • • • • • • • • •	tt.	
GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other	`	SHAVELFA	DK INTERVALS	From			ft. to .			ft., From	n		f	t. to		ft.	
Grout Intervals: From																	
What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 1 Frod 3 Sewer lines 5 Cess pool 8 Sewage lagoon 1 Septic tank 4 Lateral lines 7 Pit privy 1 Full storage 1 Sewer lines 6 Seepage pit 9 Feedyard 1 3 Insecticide storage 1 How many feet? 5 0 Creek FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 3 top soil 3 12 clay brown 1 2 17 clay yellow 1 17 28 clay grey 28 30 clay grey 28 30 clay grey 32 38 fine/course sand grey 33 32 clay grey 34 36 clay grey 35 38 63 clay grey 36 3 100 shale lite grey 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)2280.5. Water Well Contractor's Licence No 1.82 This Water Well Record was completed on (mo/day/y)440.5. INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and ERIMOT clearly. Please fill in blanks. underfine or circle the correct answers. Send up three copies to Kansas Department of Health and Environment. Bureau of Water, Geology Section, 1000 SW Jackpean of Seed up three copies to Kansas Department of Health and Environment. Bureau of Water, Geology Section, 1000 SW Jackpean Seed seeds 12-1867. Telephone? 785-296-5522. Seed up three copies to Kansas Department of Health and Environment. Bureau of Water, Geology Section, 1000 SW Jackpean, 5100 SW Jackpean SE, suite 4200, Topeks, Kansas Seed 1500 from the Lower and retain one for your	6 GROL																
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage creek. Direction from well? East How many feet? 50 Fends TO PLUGGING INTERVALS O 3 top soil 3 12 clay brown 12 Ferding To PLUGGING INTERVALS O 3 top soil 3 12 clay grey green 12 Ferding To PLUGGING INTERVALS 17 28 clay grey green 13 Clay grey 13 38 fine/course sand grey 13 38 fine/course sand grey 13 38 63 clay grey 14 Septimental Plant of Water Well Record was completed on (mo/day/year) 2-28-05. Water Well Contractor's Licence No 182 Firsder Drilling Co. INc by (signature) Septiment Bureau of Water, Bedring House, Septiment Bureau of Water, Bedring Fine Plants and Fine Propore Septiment Bureau of Water, Geology Section, 1905 Firsder Drilling Co. INc by (signature) INSTRUCTIONS: Use typewriter or ball point pen PLEASE PRESS FIRMY and PEMINT clearly. Please fill in blanks, underline or circle the correct answer. Send top three copies to Kansas Department of Health and Environment. Bureau of Water, Geology Section, 1905 Water Well Record was completed on (mo/day/yr) 3 Frader Drilling Co. INc by (signature) INSTRUCTIONS: Use typewriter or ball point pen PLEASE PRESS FIRMY and PEMINT clearly. Please fill in blanks, underline or circle the correct answer. Send on to Water Read retain one for your	Grout Inter	vals: Fron	n1	ft. to	2.3	ft., From	n		ft. to		ft.,	From		ft. to		ft.	
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 15 Other (specify below) CTECK How many feet? 50 Insecticide storage 15 Other (specify below) CTECK How many feet? 50 Insecticide storage 15 Other (specify below) CTECK How many feet? 50 Insecticide storage 15 Other (specify below) CTECK How many feet? 50 Insecticide storage 15 Other (specify below) CTECK TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS O 3 top soil 7 Clay brown 12 In clay yellow 17 Clay yellow 17 Clay yellow 17 Clay grey 18 Clay grey 19 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) 2 - 2 - 2 - 2 - 0 - 5 Clay grey 18 Clay gre	What is the	e nearest so						10 Lives	stock per	ns	1	4 Abando	ned water w	vell			
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage CTECK Direction from well? East 50 ' FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 3 1cop soil 3 12 clay brown 12 17 clay yellow 17 28 clay grey 28 30 clay grey green 30 32 clay grey 32 38 fine/course sand grey 33 38 fine/course sand grey 36 100 shale lite grey 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). 2-28-05. Water Well Contractor's Licence No	1 Sep	tic tank	4 Later	ral lines													
Direction from well? East How many feet? 50 ¹ FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 3 top soil 3 12 clay brown 12 17 clay yellow 17 28 clay grey 28 30 clay grey 28 30 clay grey 32 38 fine/course sand grey 32 38 fine/course sand grey 30 32 clay grey 31 38 63 clay grey 32 38 fine/course sand grey 33 38 fine/course sand grey 34 38 63 clay grey 55 10 PLONTRACTOR'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) 2.28.05. Water Well Contractor's Licence No 18.2. This Water Well Record was completed on (mo/day/year) 4.4.4.05. INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRISS IFIMILY and PRIMIT Clearly. Please fill in blanks, underline or circle the correct answyrs. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 100 SW Jackson St., Sulfa vansas 66612-1867. Telephone 785-296-5822. Send not by Water Geology Section, 100 SW Jackson St., Sulfa vansas 66612-1867. Telephone 785-296-5822. Send not by Water Well converted new Water Well convert answyrs. Send top three copies to Kansas Department of Health and Environment, Bureau of the Water Well. CONNER and testin one for your		•	• •			-	•						pecify below	w)			
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water Well Contractor's Licence No	63	100	shal	<u>le lite (</u>	grey									7075			
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water Well Contractor's Licence No	CONTR	ACTOR'S O	R LANDOWNE	R'S CERTIFICA	ATION: T	his wate	er well	was (1)	construc	ted, (2) rec	construct	ed, or (3)	plugged	under my	jurisdiction	and was	
Water Well Contractor's Licence No	completed o	on (mo/day/y	ear)2.–28	-05						and this re	ecord is t	rue to the	best of m	y knowledo	e and belie	f. Kansas	
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline 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 your	Water Well	Contractor's	Licence No	182		Th	is Wa	ter Well F	Record w	as complete	ed on (m	no/day/yr)	4-	4-05	•••••		
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			writer or ball point pe	n. <u>PLEASE PRESS F</u>	FIRMLY and	l <u>PRINT</u> cle	early. Pl	ease fill in bl									
					son St., Suit	te 420, Top	eka, Ka	nsas 66612	1367. Telep	none 785-296-	-5522. Send	one to WAT	IER WELL C	WNER and re	ain one for you	זג	