WATER WELL RI		WWC-5		vision of Water			/IW4R	
Original Record		ge in Well Use		ources App. No.		Well ID		
1 LOCATION OF WA	Fraction		ction Number 6	Township Number Range Number R 21 ■ E □ W				
County: ATCHINS	<del></del>	½ NW¼	Street or Rural Address where well is located (if unknown, distance					
2 WELL OWNER: La Business: KDHE	ist Name:	First:	direction from nearest town or intersection): If at owner's address, check here:					
Address: 1000 SW J	IACKSON ST							
Address:	ACROCITO	401 MAIN	101 MAIN ST, ATCHINSON KS					
City: TOPEKA	State: KS	ZIP: 66612						
3 LOCATE WELL	4 DEPTH OF CO	MPLETED WELL	. 20 f	5 Latitude	39.56059	) (decim	al deorees)	
WITH "X" IN	Depth(s) Groundwater		Longitu	Longitude: 95.11844 (decimal degrees)				
SECTION BOX:	2) ft. 3) ft., or 4)Dry Well				al Datum: WGS 84	■ NAD 83 □	NAD 27	
	WELL'S STATIC WATER LEVEL:9.30 ft.				Source for Latitude/Longitude:			
	below land surface, measured on (mo-day-yr)9/23/20							
NW NE					(WAAS enabled? Yes No)			
	Pump test data: Well water was				■ Land Survey ☐ Topographic Map ☐ Online Mapper:			
W E		water was		☐ Oпппе wapper.				
SWSE		rs pumping			700 57			
	Estimated Yield:	onm		6 Elevation:ft. Ground Level				
S	8.5 in. to 20	ft. and Source: Land Survey GPS Topographic Ma						
mile		in. to	ft.					
7 WELL WATER TO BE USED AS:         1. Domestic:         5. □ Public Water Supply: well ID								
Domestic:     ☐ Household		ater Supply: well ID.						
☐ Lawn & Garden	6. Dewatering: how many wells?				11. Test Hole: well ID			
Livestock	— 1 × × × × × × × × × × × × × × × × × ×				12. Geothermal: how many bores?			
2. Irrigation	9. Environmental Remediation: well ID				a) Closed Loop			
3.   Feedlot					b) Open Loop   Surface Discharge   Inj. of Water			
4.  Industrial	Recovery	/ Injection		13. 🔲 Othe	r (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 2 in. to 50 ft., Diameter in. to ft., Diameter in. to ft.								
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No. Sch. 40.								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)								
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 CONCRETE 0-1     Grout Intervals: From								
		ft., From	ft. to	ft., From	ft. to	ft.		
Nearest source of possible Septic Tank	e contamination:    Lateral Line	na Die Dais-		T Comments als Dama	□ Iti-	ida Ctamana		
Sewer Lines	☐ Cess Pool		I agoon	Livestock Pens Fuel Storage		ide Storage ned Water Well		
☐ Watertight Sewer Lir				Fertilizer Stora				
Other (Specify)  Direction from well? Southwest  Distance from well? 256  ft.								
Direction from well? Sou	uthwest	Distance from	well? 256		ft.			
10 FROM TO	LITHOLO	OGIC LOG	FROM	TO L	ITHO. LOG (cont.) or	PLUGGING INT	ΓERVALS	
0 20 5	SILTY CLAY, BROW	/N			· · · · · · · · · · · · · · · · · · ·			
				<del> </del>				
		B.44						
				111.000 11000			m.u-	
Notes: U4-003-14887								
<del>  </del>								
11 CONTRACTORS	OD I ANDOMENICO	2C CEDTIFIC ATT	ON: This	or wall was	constructed [] -cos	netructed or [	Inlugged	
11 CONTRACTOR'S under my jurisdiction as	nd was completed on A	mo-day-year\ 9/21	OIN: Inis wai	d this record is	true to the best of my	kwowledge an	ı piugged id belief.	
Kansas Water Well Cor	ntractor's License No.	585 This	Water Well R	ecord was comr	oleted op Lm‰dav-xe	ar) $11/18/20$ .		
Kansas Water Well Contractor's License No. 585 This Water Well Record was completed on (pro-day year) 11/18/20 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, Burea 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.								
					for your records. Teleph	one 785-296-5524. <b>Revised 7/10</b>		
Visit us at http://www.kdheks	s.gov/waterwell/index.html		KSA 82a-1	. 414		Revised //10	#4013	

