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No.				R WELL REC	ORD For		KSA 82a-				
Distance and direction from nearest town or city sterie address of well if coated within city? WATER WELL OWNER KS Dept of Willidife & Parks	1 LOCATION OF								1	Range Numbe	r
Section Sect							19	T 9	s	R 8	E
2] WATER WELL OWNER, KS Dept of Wildlife & Parks RS, 61 Address Rov # 5800A River Pond Rd CRY, Staff, 2P Code Manhattan, KS 66502 Application Number 3] LAN X' IN SECTION BOX N	Distance and direc	tion from nearest					ttan KS				
RREF, ST. Address, Box # : 5500A River POnd Rd Standard Agriculture, Division of Water Resources City, Static, 2P Code Manhattan, NS 65502 COCKET WELLS LOCATON WITH	2 14/4 TED 14/5/1	OWNED KS			1 FOILUT	u, Maille	illan, No	······································			
City, Stort, 2P Code Manhattan, K6 66602 Application Number: Application Number: Depth of Communication Depth of C											
DEPTH OF COMPLETED WELL 20	RR#, St. Address,	Box # : 360	UA River Pond i	KU Na				-		on of Water Resou	ırces
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WELLS STAINC WATER LEVEL 6.24 ft. below land surface measured on molicalyly 12/02/15 Purple test data: Mew laver was Ft. after hours pumping Gpm Som Well water was Ft. after hours pumping Gpm Som Well water was Ft. after hours pumping Gpm Som Well water was Ft. after hours pumping Gpm Gpm Well water was Ft. after hours pumping Gpm Gpm Well water was Ft. after hours pumping Gpm		N	Depth(3) Cround	water Liteour	itered 1.5_		'	l. Z	ii. J		- FI.
X Est. Meld Gm: Well water was being to 20 ft. and orbiting in the Service of Service			WELL'S STATIC	WATER LEV	EL 6	.24 ft.	below land	surface measured on	mo/day/yr	12/02/15	
ESLY Field GPM: Well water was		NE	Pump	test data:	Well water v	was	1	=t. after	hours pur	mping (Gpm
E Bore hole Diameter 8.5 in. to 20 ft. and in. to Ft. Well LWATER TO BE LUSED AS 5 Public water supply 8 Air conditioning 11 injection well 1 pectors well 1 comestic 3 Feed lot 6 Oil field water supply 9 Devatering 12 Other (Specify below) 12 Impectors well 1 comestic 3 Feed lot 6 Oil field water supply 9 Devatering 12 Other (Specify below) 12 Impectors well 1 comestic 3 Feed lot 6 Oil field water supply 9 Devatering 12 Other (Specify below) 12 Impectors well 1 comestic 3 Feed lot 6 Oil field water supply 9 Devatering 12 Other (Specify below) 12 Impectors well 1 Steel 3 RMF (SR) 6 Asbestos-Cement 9 Other (specify below) 12 Perus in the 12 Perus i		1 :	Est. Yield	Gpm: \	Nell water v	was	1	Et. after	Hours pu	mpina (Gpm
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2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well MW-8. Was a chemical/bacteriological sample submitted to Department? Yes No X MY syst, mordaylyr sample was Submitted to Department? Yes No X MY Mater Well Disindender? Yes No X MY Water Well Disindender? Yes No X MY Welford Clamped 1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped 2 PVC 4 A ABS 7 Fiberglass Threaded X Fiberglass In. to 10 Dis In. to ft. Dis In. T	7	 SE	WELL WATER T	O BE USED A	ĀS: 5 Pul	blic water s	upply supply	8 Air conditionir 9 Dewatering	ng 11 12	Injection well Other (Specify bel	' '.' low)
S		1	2 Irrigation	4 Industria	al 7 Lav	wn and gard	den (domest	c) 10 Monitoring v	/ell	MW-8	
Submitted Subm	*										vas
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1 Sizel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below)	5 TYPE OF BLAN	K CASING USE		5 Wrough	t Iron	8 Concr					
PVC											
Blank casing diameter 2									Thread	ed X	
Blank cashing diameter	h			⊏ +							
TYPE OF SCREEN OR PERFORATION MATERIAL:	Blank casing diame	eter 2	in. to 10	Dia		In. t	:0	ft., Dia	ir	n. to	ft.
TYPE OF SCREEN OR PERFORATION MATERIAL:	Casing height abov	e land surface	FLUSH	In., weight	SC	H 40	Lbs./ft	. Wall thickness or g	auge No.		
1 Steel	TYPE OF SCREEN	OR PERFORA	TION MATERIAL:			7	PVC	10 Asbest	os-cement		
### 2 Brass	1 Steel	3 Sta	ainless steel	5 Fibergla	ss	8	RMP (SR)	11 Other (specify)		
SCREEN-PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) 10 Other (specify) 10 Other (specify) 11 None (open hole) 12 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) 11 Other (specify) 12 Cement grout 13 Bentonite 14 Chem 15 GROUT MATERIAL: 1 Neat cement 2 Cement grout 1 Septic tank 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 13 Insecticide storage 15 Other (specify) 16 Uvestock pens 16 Other (specify) 17 Contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Other (specify) 16 Other (specify) 17 Contaminated Site 18 Saw out 11 None (open hole) 9 Drilled holes 10 Other (specify) 10 Other (specify) 11 From 12 Cement grout 13 Bentonite 4 Other 14 Abandoned water well 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Other (specify) 16 Other (specify) 17 Contaminated Site 18 Saw out 19 Feedyard 10 Other (specify) 11 Fuel storage 15 Other (specify) 16 Other (specify) 17 Contaminated Site 18 Sam out 19 Feedyard 19 Feedyard 10 Uvestock pens 10 Other (specify) 11 Fuel storage 16 Other (specify) 17 Other (specify) 18 Other (specify) 19 Other (specify) 19 Other (specify) 10 Other (specify) 11 Topsoil 12 Septic tank 13 Insecticide storage 14 Abandoned water well 15 Other (specify) 16 Other (specify) 17 Other (specify) 18 Septic tank 19 Other (specify) 19 Topsoil 10 Other (specify) 10 Other (specify) 10 Other (specify) 11 Other (specify) 11 Other (sp	2 Brass	4 Ga		6 Concrete	e tile	9	ABS	12 None L	sed (open	hole)	
2 Louvered shutter	SCREEN OR PER				5 Gauzeo	wrapped		8 Saw cut	1	1 None (open hol	e)
SCREEN-PERFORATED INTERVALS: From	1 Continuou	s siot	3 Mill slot		6 Wire wr	apped		9 Drilled holes			j
SCREEN-PERFORATED INTERVALS: From	2 Louvered:	shutter	4 Key punched		7 Torch c	ut		10 Other (specify)		
From	SCREEN-PERFOR	RATED INTERVA	LS: From	10 ft	. to	20	ft. í	rom	ft. to		ft.
SAND PACK INTERVALS: From 8 ft. to ft. From ft. to Ft. Ft. Ft. From ft. to Ft. From ft. to Ft. From ft. to Ft. Ft. From ft. to Ft. From ft. to Ft. From ft. to Ft. Ft. From ft. to Ft. Ft. From ft. to Ft. From ft. to Ft. Ft. From ft. to Ft. From ft. to Ft. Ft. From ft. to Ft. Ft. Ft. Ft. From ft. To Ft.			From	ft	. to		ft. I	rom	ft. to		Ft.
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ander the business name of Associated Environmental, Inc. By (signature) Bradley Johnson									_		
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Information Surgery of Vater, Topeka,			Associate	d Enviror	mental.	Inc.	· B	y (signature) Brac	lley J	onsøn	
			anks and circle the corre	ct answers. Se	end three cor	oies to Kansa	s Departmen	t of Health and Anyiron	me Vie	Mater Topeka	,