	NON OF WA	ATER WELL:	Fraction	SN	LANE	KSA 82a Se	ction Number		Number S	Range Nur	mber E/W
Distance a	nd direction	$T \cup C$)(¥ 1')		of well if located	within city?	Gol	re,KS			
RR#, St. A City, State	ddress, Box , ZIP Code	# : 808 0	Cord ter. Ks u	0775.	a r	3 d		Applicat	tion Number:	vivision of Water F	
	N SECTION	DCATION WITH	4 DEPTH OF Depth(s) Grou	COMPLE indwater	Encountered	1	f	t. 2	ft. 3		ft.
	I I	1,	(A.	ippo test	data: Well wate	r was	ft.	after	hours p	umpingumping	gpm
w	-NW	- NE E	WELL WATER 1 Domesti 2 Irrigation	TO BE I	USED AS: 5 Feedlot 6	Public water Oil field wate	supply r supply	8 Air condition 9 Dewatering	ning 11 In 12 C	jection well ther (Specify belo	ow)
_	-SW	- SE	Was a chemic mitted	al/bacter	iological sample	submitted to		YesNo Vater Well Disinfo		no/day/yrs sample No	
TYPE 1 Stee 2 PV	el	CASING USED: 3 RMP (S 4 ABS	SR)		ught iron estos-Cement erglass		(specify below		Weld	edaded	
Blank casi Casing he	ng diameter ight above la		in. to	H.8	ft., Dia		in. to	ft.,	Dia	e No. 502	210 ft.
TYPE OF 1 Stee	SCREEN O	R PERFORATIO 3 Stainles 4 Galvani	ON MATERIAL: ss Steel	5 Fibe	erglass	(7 P)	MP (SR)	10 11	Asbestos-Cem	ent	
	OR PERFO	RATION OPENI	NGS ARE:	0 001	5 Guaz	ed wrapped		8 Saw cut		11 None (open	hole)
2 Lou	itinuous slot vered shutte	er (_4-1	Will slot Key punched	18	7 Torch				ecify)		
	*	ED INTERVALS		† 'O'''	ft. to ft. to		ft., From	າ າ	ft. to		ft.
'	GRAVELPA	CK INTERVALS									
_	JT MATERIA	4 1	at cement 26	١	ement grout	3 Ben				ft. to	
What is the	e nearest so	ource of possible	contamination:				10 Lives	stock pens	14 A	bandoned water v	
1 Septic tank 4 Lateral lines 2 Sewer lines 5 Cess pool				7 Pit privy 8 Sewage lagoon			11 Fuel storage12 Fertilizer storage		15 Oil well/Gas well16 Other (specify below)		
Watertight sewer lines 6 Seepage pit Direction from well?				9 Feedyard			cticide storage ny feet?	m(nore.		
FROM	то		LITHOLOGI	C LOG		FROM	то		PLUGGING IN	TERVALS	
O_	2	LCPSC	N I								
a	28	2000						7-4			
28	42	sand	w/ bro	WN	clay						
42	57	cours	e sar	10							
57	58	shale									
								4-14-1			
CONTR	ACTOR'S C	DR LANDOWNE	ER'S CERTIFICA							ler my jurisdiction	
completed of Vater Well	on (mo/day/) Contractor's	year) s Licence No			22-04		and this re		e best of my kn	owledge and belie	
inder the b	usiness nan	ne of	topua	PU	$M\rho$		by	(signature)	Von	more	NP

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 records. Fee of \$5.00 for each <u>constructed</u> well.