WATER WELL RECORD	FOLIII AA			r Resources; App. No.		
1 LOCATION OF WATER W County: OTTAWA	Fraction SE 1/4 SE	1/2 (//) 1/4	Section Number	Township Number T /2 S	Range Number R (2/4) E/W	
Distance and direction from ne	arest town or city street address	of well if				
located within city?	ithin city?			Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude:		
located within city? 1637 OTTAWA RD. 2 WATER WELL OWNER: KACCHEE CONTRACTION Elevation: RR#, St. Address, Box # : 4820 N. DORMAN RD. City State ZIP Code Datum:						
2 WATER WELL OWNER:	KARCHER CONT	RACTINE	Elevation:			
RR#, St. Address, Box # :	YYZO N. DORMA	W KD.	Datum:			
City, State, ZIP Code :	VALINA KU 67	401	Data Collection	Method:		
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL						
LOCATION						
WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered (1)						
SECTION BOX: WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr 2027						
Pump test data: Well water was						
Est. Yieldgpm: Well water was						
WELL WATER TO BE USED AS: 5 Public water supply WELL WATER TO BE USED AS: 5 Public water supply 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 11 Injection well 12 Other (Specify below)						
W E Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well						
Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs						
Sample was submitted						
S						
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: GluedX Clamped						
1 Steel 3 RMP (SR)	6 Asbestos-Cement 9	Other (specify	below)	Welded		
2 PVC 4 ABS 7 Fiberglass Threaded						
2 PVC 4 ABS 7 Fiberglass Threaded. Blank casing diameter in to ft., Diameter in to ft., Diameter in to ft. Casing height above land surface in., Weight l. 60 lbs./ft. Wall thickness or guage No. 1 Dec. 26.						
Casing height above land surface						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
1 Steel 3 Stainless St	eel 5 Fiberglass 7 P	$\frac{\text{VC}}{\text{O}}$ 9 A	ABS	11 Other (Specify)	1 1 2	
2 Brass 4 Galvanized SCREEN OR PERFORATION C	Steal 6 Concrete tile 8 R	M(SR) = 10 A	Asbestos-Cement	12 None used (open	nole)	
		7 Torch cut	0 Drilled holes	11 None (open h	ole)	
1 Continuous slot 3 Mill slot • 03.25 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)						
SCREEN-PERFORATED INTERVALS: From. 90 ft. to 110 ft., From ft. to ft.						
From						
GRAVEL PACK INTERVALS: From ft. to ft. to ft., From ft., From ft. to ft. to ft.						
From ft. to ft., From ft. to ft.						
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
Grout Intervals: From	ft to	m XD	ft to 83	ft From	ft to ft	
Grout Intervals: From						
	4 Lateral lines 7 Pit privy	10 Livesto	ock pens 13 In	secticide Storage	16 Other (specify	
	5 Cess pool 8 Sewage lago			bandoned water well	below)	
3 Watertight sewer lines 6 Seepage pit 9 Feedyard Direction from well? 12 Fertilizer Storage 15 Oil well/gas well How many feet? 15 Oil well/gas well How many feet?						
Direction from well?						
FROM TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INT	ERVALS	
0 12 SAWLY	LOOM BROWN			1100		
12 14 CLAY	BRAY					
	TONE TAN					
74 91 SAND	STONE BEOWN					
	STONK TAN STONE BROWN					
	L GLAY					
TOP BD SHALL	CGERY					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed. (2) reconstructed. or (3) plugged						
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) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No.						
Kansas Water Well Contractor's License No						
under the business name of PEST WELL PUMP Sieving signature Country Signature INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, under time or circle the correct answers. Send top						
INSTRUCTIONS : Use typewriter or b	all point pen. PLEASE PRESS FIRMI	LY and PRINT clear	ly. Please fill in blank	cs, underline or circle the c	ofrect 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 constructed well. Visit us at						
http://www.kdheks.gov/waterwell/index.html.						