Original Record		Form WW			vision of Water ources App. No	1	Well ID
1 LOCATION OF W		L. Frac	tion	Sec	ction Number		
County: OTTA			14 NE1/4 NE1/40			T /2 S	1 2 2
		TA CON First	ROANIEY	Street or Ru	ral Address v		(if unknown, distance and
Business:			Denac	direction from	nearest town or i	ntersection): If at owner	er's address, check here:
Address: 985 A	lwy K-	18		KMILE	: WEST O	F Intelseet	er's address, check here:
Address: 703 CO	CHESTINGON,	State: KS ZIP:	1-14145	AND HIN	y K-104	MMILE NE	PETH
3 LOCATE WELL							10 p.
WITH "X" IN		OF COMPLE			5 Latitu	de:	(decimal degrees)
SECTION BOX:		oundwater Encou			Longit	ude:	(decimal degrees)
N		ft. 3)			Datum:	☐ WGS 84 ☐ NA	D 83 □ NAD 27
	WELL'S S	TATIC WATER L	EVEL: / C	ft.		for Latitude/Longitude	
'	below I	and surface, meas	ured on (mo-day-y	/T)	∽ □ GP)
NW NE	NW NE '□ above land surface, measured on (mo-day-yr) Pump test data: Well water was					(WAAS enabled?	
W		hours pump				nd Survey Topog	
60			/as ft			inite mapper	
SW SE		hours pump		gpm	6 753	•	
	Estimated Y	/ield: \) gpi	m .				t. Ground Level TOC
S 	Bore Hole I	Diameter:9			Source		GPS Topographic Map
	DETIGED		in. to	It.		U Other	
7 WELL WATER TO			1 11 775		10 🗖 00	E' 11 W	
Domestic: Household] Public Water Sup] Dewatering: how					lease
Lawn & Garden		Aquifer Recharg				ole: well ID sed 🔲 Uncased 🔲	
Livestock		Monitoring: wel				ermal: how many bore	
2. Irrigation		nvironmental Rem				sed Loop Horizor	
3. ☐ Feedlot] Air Sparge	☐ Soil Vapor E				oischarge Inj. of Water
4. 🔲 Industrial		Recovery	☐ Injection		13. 🔲 Oth	er (specify):	
Was a chemical/bacter	iological sar	mple submitted	to KDHE?	es No	If yes, date	sample was submitt	ed:
Water well disinfected?	¥ Yes □	Ño			-	-	
8 TYPE OF CASING	USED: S	Steel PVC 🗆	Other	CASI	NG JOINTS:	Glued Clampe	ed Welded Threaded
Casing diameter 5	in. to	ft., Diam	neter	in. to	ft., Diame	eter in. to .	., ft.
Casing diameter							
	surface 💢 🕻	? in. V	Veight / . 🥨 🖳	lbs./ft.	Wall thickr	iess or gauge No. 🦫 🤐	<i>E36</i>
TYPE OF SCREEN OF	surface S.C R PERFORA	TION MATERIA	Veight / AL:	lbs./ft.	Wall thickr		E.S.C.
TYPE OF SCREEN OF ☐ Steel ☐ Stain	surface R PERFORA' nless Steel	ΓΙΟΝ MATERIA ☐ Fiberglass	Veight //	lbs./ft.	Wall thickr ☐ Othe		
TYPE OF SCREEN OF ☐ Steel ☐ Stain ☐ Brass ☐ Galv	surface R PERFORA' nless Steel vanized Steel	ΓΙΟΝ MATERIA ☐ Fiberglass ☐ Concrete til	Veight //	lbs./ft.	Wall thickr ☐ Othe		E. 3.6
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