				ATER WELL REC	ORD Form			212 ID No		
	ON OF WATER					1	ction Number		<del></del>	
County:	Rus		NW			1/4	35	т <b>13</b> s	R 14 W	
Distance and direction from nearest town or city street address of well if located within city?  3 ft E. of Front St. & 42 ft N. of Oak Dale St., Russell										
	WELL OWNER		KDHE							
RR#, St. Add	dress, Box#	:	1000 SW	Jackson St	. Ste 410	)		Board of Agriculture,	Division of Water Resources	
City, State, 2	ZIP Code	:	Topeka,	KS 66612				Application Number:		
LOCATE	WELL'S LOC	ATON WI	'  DEPTH C	OF COMPLETED	WELL	3(	O ft. ELE\	ATION: 1	834.17 (TOC)	
_	X Depth(s) Groundwater Encountered 1 ft. 2 ft. 3								ft. 3 ft.	
	NW	- NE	WELL'S STA	TIC WATER LE	VEL 23	.76 ft	below land s	urface measured on mo	day/yr 11-4-05	
i I	'`;''	1	,						urs pumping gpm	
Mile M	$\rightarrow$	4	E Est Yield	apm.	Well water v	vas	f	t after ho	urs numning gpm	
7			Bore Hole Di	ameter 8.5	in. to	3	0	ft. and	in. to ft.	
	sw	- SE	WELL WATE	R TO BE USED	AS: 5 Pul	olic water	supply	8 Air conditioning	in. to ft. 11 Injection well 12 Other (Specify below)	
	i I	. i . i	1 Dom	estic 3 Feed lo	ot 6 Oil	field water	r supply	9 Dewatering	12 Other (Specify below)	
' -	2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well									
Was a chemical/bacteriological sample submitted to Department? Yes No X If yes, mo/day/yr sample w										
			submitted				Wa	ter Well Disinfected? Ye	es No X	
5 TYPE OF	F BLANK CAS	SING USE	D:	5 Wroug	ht Iron	8 Cond	rete tile	CASING JOINTS:	Glued Clamped	
_1 Ste	el	3 RM	IP (SR)	6 Asbest	os-Cement	9 Othe	r (specify belo	w)	Welded	
2 PV	C	☐ 4 AB	s	7 Fibergl	ass			[7	hreaded Flush	
Blank casing diameter 2 in. to 20 ft., Dia in. to ft., Dia in. to ft. Casing height above land surface Flushmount in., weight 0.703 lbs./ft. Wall thickness or gauge No. Sch. 40										
TYPE OF SCREEN OR PERFORATION MATERIAL:  7 PVC 10 Asbestos-cement										
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)										
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)										
SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)										
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes										
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)										
SCREEN-PERFORATED INTERVALS: From 20 ft. to 30 ft. From ft. to ft.										
			From		ft. to		ft. I	rom	ft. toft.	
GR/	AVEL PACK II	NTERVAL	S: From	18	ft. to	30	ft. I	rom	ft. toft.	
From         ft. to         ft. From         ft. to         ft. From         ft. to         ft. ft.           6 GROUT MATERIAL:         1 Neat cement         2 Cement grout         3 Bentonite         4 Other										
									ft. toft.	
			ole contamination							
What is the nearest source of possible contamination:  10 Livestock pens 14 Abandoned water 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/ Gas well										
2 Se	wer lines								6 Other (specify below)	
3 Watertight sewer lines 6 Seepage pit 9 Feed							13 Insec	cticide storage		
Direction from well?  How many feet?										
FROM	ТО	CODE		HOLOGIC LOG		FROM	ТО	PLUGGI	NG INTERVALS	
0	3	CL	Clay, silty, s moderate p	soft to firm,	low to					
	<del>                                     </del>	CL	Clay, brittle			<del> </del>	<del></del>			
3	8	CL	light brown		calcite,	1				
			Clay, firm to		rate to	†				
			high plastic				Ì	`		
8	30	CH	brown							
						-				
						-				
	-					+				
						-				
						+				
7 CONTR	ACTOR'S OR	LANDOM	NER'S CERTIFI	CATION: This w	ater well was	(1) constr	ructed (2) rec	onstructed, or (3) plugge	d under my jurisdiction and was	
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/yr)  11-3-05  and this record is true to the best of my knowledge and belief. Kansas										
Water Mail	Contractor's	icense N		531					n (mo/day/yr) 11-29-05	
			Geotechr		e Inc			record, was completed of	1/1/day/yr) / 11-23-03	
under the business name of Geotechnical Services, Inc. by (signature)  INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W										
I Institute										