			Form V				vision of Water			SMW8	
				in Well Use			ources App. No.		Well ID		
1 LOCA	TION OF V	VATER WELL	.:	Fraction			ction Number	Township Numb		ge Number	
County: RUSSELL NW¼ NE ¼ NE ¼ NE ¼ NE ¼ 34 T 13 S R 14 □ E											
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:											
	: KDHE-BI				d	lirection from	nearest town or int	ersection): If at owner	r's address, o	heck here:	
Address: 1000 SW JACKSON Address: 336 E. WICHITA AVE., RUSSELL, KS											
4 DEPTH OF COMPLETED WELL:										(decimal degrees)	
	ON BOX:	Depth(s) Grou	undwater E	Encountered: 1).	1.8	ft.	Longitu	de:98.856	34	(decimal degrees)	
	N 2)						Horizontal Datum: ☐ WGS 84 ■ NAD 83 ☐ NAD 27				
	WELL'S STATIC WATER LEVEL:12.83. ■ below land surface, measured on (mo-day-yr).						Source for	r Latitude/Longitude			
'	measured on (me	o-day-y	r)!!!: ! !!!		GPS (unit make/model:)						
NW	-NWNE □ above land surface, measured on (mo-day-yr)						I	(WAAS enabled? □		0)	
1,,,	1 1 1 1 7 0 1							■ Land Survey ☐ Topographic Map ☐ Online Mapper:			
W	E	Well water was ft.						Onnic wapper			
sw	SW SE after hours pumping gpm						1935.06				
	Fstimated Yield: gp					_		6 Elevation: 1835.96ft. ☐ Ground Level ■ TOC			
	S Bore Hole Diameter: 8.5 i								☐ GPS ☐ Topographic Map		
1 mile mile in. to ft.											
7 WELL WATER TO BE USED AS:											
1. Domestic				ter Supply: well				ield Water Supply: 16			
House				g: how many we			Test Hol	e: well ID			
	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID					λ <i>i</i> ο	☐ Cased ☐ Uncased ☐ Geotechnical				
_	☐ Livestock 8. ■ Monitoring: well ID SMW8						12. Geothermal: how many bores?				
	☐ Irrigation 9. Environmental Remediation: well ID						a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
3. Feedle			Air Sparge		•	xtraction					
4. Indust			Recovery	☐ Injecti				(specify):			
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:											
Water well disinfected? ☐ Yes ■ No											
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other CASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ■ Threaded											
Casing diameter											
Casing height above land surface											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)											
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)											
SCREEN OR PERFORATION OPENINGS ARE:											
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)											
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)											
SCREEN-PERFORATED INTERVALS: From 15 ft. to 30 ft., From ft. to ft., From ft. to ft.											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Cement 0-0.5											
Grout Intervals: From											
Septic			u: iteral Lines	s □ Pit P	rivv		Livestock Pens	□ Insection	cide Storage		
Sewer			ess Pool				Fuel Storage		oned Water		
□ Sewer Lines □ Cess Pool □ Sewage Lagoon ■ Fuel Storage □ Abandoned Water Well □ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well											
Other (Specify)											
Direction fr	om well?	• • • • • • • • • • • • • • • • • • • •		Distance fr		11?		ft.			
10 FROM	TO	LI	THOLOG	IC LOG		FROM	TO LI	THO. LOG (cont.) or	PLUGGIN	G INTERVALS	
0		CONCRETE									
0.5	18	SILTY CLAY									
18	18.5	LIMESTONE									
18.5	23	SILTY CLAY									
23	23.5	LIMESTONE									
23.5	30	SILTY CLAY									
				*		Notes:					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged											
under my	jurisdiction :	and was complete	ted on (m	.0-day-year) .1.1	1/6/17.	and	this record is t	rue to the best of m	y knowledg	ge and belief.	
Kansas Wa	ater Well Co	ontractor's Licen	ise No. 5	85 Th	is Wat	er Well Re	cord was comp	lexed on (xao⊱day-y	6a x / 12/4/1	l./	
under the l	business nan	ne of ASSOCI	ated ei	NVIRONMEN.	TALJN	ICS	ignature	110000	GUDA		
Mail	1 white copy a	long with a fee of \$5	5.00 for eacl	h constructed well t	o: Kans	as Departmen	t of Health and En	ironment, Bureau of W	ater, GWTS S	Section,	
			ka, Kansas (56612-1367. Mail	one to W	ater Well Ow	ner and retain one	for your records. Teleph	ione 785-296-	5524.	
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015										7/10/2015	

