WATER WELL R			ion of Water		
Original Record			irces App. No.		Well ID
1 LOCATION OF W County: Tres	NE Secti	Section Number   Township Number   Range Number   R 23   E 1 W			
2 WELL OWNER: Last Name . TATC A First Street or Rural Address where well is located (if unknown distance and					
Business Cedax Bluss Wild 108 Area direction from nearest town or intersection): If at owner's address, check here:					
Address 32001 Hwy 149 6 Miles South a 2/2 miles East or					
City: Ellis	State: K5 71P.67637		Trego C	enter	
3 LOCATE WELL		20	0		
WITH "X" IN	4 DEPTH OF COMPLETED WELL:	It.			(decimal degrees)
SECTION BOX:	Depth(s) Groundwater Encountered: 1) 15	)			(decimal degrees)
N	WELL'S STATIC WATER LEVEL: 16 6 6				1 □ NAD 83 □ NAD 27
X	below land surface, measured on (mo-day-	(r) 9-15-18		r Latitude/Longitude:	)
	above land surface, measured on (mo-day-	-yr)	(WAAS enabled? ☐ Yes ☐ No)		
	Pump test data: Well water was				
W I	after hours pumping		☐ Onlin	e Mapper:	
SW SF	Well water was				
	after hours pumping	ghm	6 Elevation	n:ft.	☐ Ground Level ☐ TOC
8	Estimated Yield: 20 gpm Bore Hole Diameter: 9 in. to	ft. and	Source:	Land Survey 🔲 🤇	GPS 🔲 Topographic Map
milc	in. to			] Other	
7 WELL WATER TO					
1 Domestic.	<ol> <li>Public Water Supply well ID</li> </ol>				asc
☐ Household	6. Dewatering: how many wells?			e: well ID	
☐ Lawn & Garden ☐ Livestock	riden 7. Aquifer Recharge: well ID Cased Uncased Geotechnical  8. Monitoring: well ID 12. Geothermal: how many bores?				
2. 🗆 Irrigation	9. Fryironmental Remediation: well II			d Loop	
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor				scharge  Inj. of Water
4. Industrial	☐ Recovery ☐ Injection		13. 🔀 Other	(specify): Wild!	ise
Was a chemical/bacteriological sample submitted to KDHE?   Yes No If yes, date sample was submitted:					
Water well disinfected? Vos 🖂 Vo					
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Inreaded					
Casing diameter	in to 30 ft. Diameter	in. to	ft Diamete	r in. to	fi.
Casing diameter 5 in to 30 ft. Diameter in to ft. Diameter in to ft. Diameter in to ft. Casing height above land surface 22 in. Weight 200 lbs./ft. Wall thickness or gauge No. 50.8.21.					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
☐ Steel ☐ Stainless Steel ☐ Fiberglass					
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)  SCREEN OR PERFORATION OPENINGS ARE:					
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Forch Cut ☐ Drilled Holes ☐ Other (Specify)					
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)					
SCREEN-PERFORATED INTERVALS: From					
GRAVEL PACK INTERVALS: From 8 ft. to					
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other					
Grout Intervals: From					
Nearest source of possible contamination:					
☐ Septic Tank     ☐ Lateral Lines     ☐ Pit Privy     ☐ Livestock Pens     ☐ Insecticide Storage       ☐ Sewer Lines     ☐ Cess Pool     ☐ Sewage Lagoon     ☐ Fuel Storage     ☐ Abandoned Water Well					
□ Sewer I ines     □ Cess Pool     □ Sewage I agoon     □ Fuel Storage     □ Abandoned Water Well       □ Watertight Sewer I ines     □ Seepage Pit     □ Feedyard     □ Fertilizer Storage     □ Oil Well Gas Well					
Other (Specify)					
Direction from well?	Distance from w	ell?			
10 FROM TO	LITHOLOGIC LOG	FROM	TO LI	IHO, LOG (cont.) or	PI UGGING INTERVALS
0 3	top 501)				
3 12	rock of medium grave!				
12 29	rock of medium grave!				e espetimental especial de la companya de la compa
29 30	Shat				
	The state of the s				Million de la companya della companya della companya de la companya de la companya della company
		Notes:			
ORL					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was A constructed. Treconstructed. or Dolugged					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☑ constructed. ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo-day-year)					
Kansas Water Well Contractor's License No. 3.76 This Water Well Record was completed on (mo-day-year)					
under the business nam	ne of D.H.D. Drilling LLC.	Sig	nature	asigh. Dec	Ator GWTS Saction
Mail I white copy along with a fee of \$5.00 for each constructed well to. Kansas Department of Health and Environment, Bureau of Water, GWTS Section 1000 SW Jackson St. Suite 420. Topeka. Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.					
Visit us at http://www.kdheks.gov/waterw/ll index/nmtl KSA 82a-1212 Revise					Revised 7/10/2015