WATER WELL R			ion of Water		W II ID	
Original Record 1 LOCATION OF W			rces App. No. on Number	Township Number	Well ID r Range Number	
County: SAL		4SF 1/4 500 ii	36	T 14 S	R C □ E M W	
2 WELL OWNER: L	ast Name: OAD ENBULCESE MAGAN	Street or Rura	l Address whe		if unknown, distance and	
Business: direction from nearest town or intersection): If at owner's address, check here:						
Address:		80	OS EILEEN			
	WA State: Ks ZIP: 62401					
3 LOCATE WELL	4 DEPTH OF COMPLETED WELL:		5 Latitude:		(decimal degrees)	
WITH "X" IN SECTION BOX:	Depth(s) Groundwater Encountered: 1)	<i>[</i> ft.	1		(decimal degrees)	
N N	2) ft. 3) ft., or 4)	☐ Dry Well	_	WGS 84 □ NAD	83 NAD 27	
	WELL'S STATIC WATER LEVEL: □ below land surface, measured on (mo-day)	V-Vr) β2-24-L 5	ı —	Latitude/Longitude:	,	
NW NE	above land surface, measured on (mo-day	/-yr)	☐ GPS (unit make/model:			
	Pump test data: Well water was 25	ft.	☐ Land Survey ☐ Topographic Map			
W E	after hours pumping		☐ Online Mapper:			
SW SE	after hours pumping					
	Estimated Yield:gpm				☐ Ground Level ☐ TOC	
S 1 mile	Bore Hole Diameter: in. to			•	PS Topographic Map	
7 WELL WATER TO	in. to	п.	<u> </u>	, onioi		
1. Domestic:	5. ☐ Public Water Supply: well ID		10. ☐ Oil Fie	eld Water Supply: lea	se	
☐ Household	6. ☐ Dewatering: how many wells? .		11. Test Hole	: well ID		
Lawn & Garden	7. ☐ Aquifer Recharge: well ID					
Livestock 2. Irrigation	9. Environmental Remediation: well 1					
3. Feedlot	☐ Air Sparge ☐ Soil Vapor		b) Open Loop Surface Discharge Inj. of Water			
4. 🔲 Industrial	☐ Recovery ☐ Injection		13. Other	(specify):		
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:						
Water well disinfected? Yes No						
Casing diameter in to 47 ft Diameter in to ft Diameter in to ft						
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other						
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, DAD ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)						
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)						
SCREEN-PERFORATED INTERVALS: From						
GRAVEL PACK INTERVALS: From						
Grout Intervals: From						
Nearest source of possible contamination:						
Septic Tank	☐ Lateral Lines ☐ Pit Privy		ivestock Pens	☐ Insectici	2	
□ 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 from well? Distance from well?						
10 FROM TO 7	LITHOLOGIC LOG	FROM	TO LIT	HO. LOG (cont.) or I	PLUGGING INTERVALS	
(2) (2)	ELLY BLOWN SILTY					
12 (19	CLAY BEDWO VERY STIC	KY			**************************************	
39 510	SAND FINE TO HEAVY				*	
56 57	SHALL GRAY					
		NI				
Notes:						
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) and this record is true to the best of my knowledge and belief.						
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. 313 This Water Well Record was completed on (mo-day-year) 02						
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas						
Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.						
1	ealth and Environment, Bureau of Water, Geology Section, 10 heks.gov/waterwell/index.html	00 SW Jackson St., Su KSA 82a-121	ite 420, Topeka, Ka	nsas 66612-1367. Telephor	ne (785) 296-3565. Revised 9/10/2012	