WATER WELL R ☐ Original Record ☐					rision of Water ources App. No		Well ID	
1 LOCATION OF W.			raction 1		ction Number			
County: SAL			WASWANEYA	SE4	23	T /4 S	R J □ E V W	
2 WELL OWNER: La	ist Name: DA	VIS	First: TACK	Street or Ru			(if unknown, distance and	
Business: Address: 420 W. Eusword direction from nearest town or intersection): If at owner's address, check here:								
City. On City of State. M. Zir. 70 / 101								
3 LOCATE WELL WITH "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL:								
WITH "X" IN	Depth(s) Gro	undwater En	countered: 1)	9 _{ft.}			(decimal degrees)	
SECTION BOX: N	2) ft., 3) ft., or 4), □ Dry Well Datum: □ WGS 84 □ NAD 83 □ NAD 27							
, , , , , , , , , , , , , , , , , , ,	WELL'S STATIC WATER LEVEL: ft. Source for Latitude/Longitude:							
	below la	nd surface, m	easured on (mo-day	-yr) U.Q .T.U.T.				
NW NE	□ above land surface, measured on (mo-day-yr)							
W E								
	Well water was ft.							
SW SE	after hours pumping						□ Ground Lavel □ TOC	
	Estimated Yi	.gpm	A and	Source: Land Survey GPS Topographic Map				
S 	Bore Hole Diameter:				Other			
7 WELL WATER TO BE USED AS:								
1. Domestic:			Supply: well ID		10. 🔲 Oil	Field Water Supply: 16	ease	
☐ Household	6. 🗆	Dewatering:	how many wells?		11. Test Hole: well ID			
Lawn & Garden			narge: well ID			☐ Cased ☐ Uncased ☐ Geotechnical		
Livestock			well ID			12. Geothermal: how many bores?		
2. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor E					a) Closed Loop ☐ Horizontal ☐ Vertical 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? X Yes \(\sum \) No								
8 TYPE OF CASING	USED: ☐ St	eel 🔀 PVC	☐ Other	CASI	NG JOINTS:	▼ Glued □ Clamped	d □ Welded □ Threaded	
Casing diameter								
Casing height above land surface in. Weight 1.60 lbs./ft. Wall thickness or gauge No. 4.26.								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ VC ☐ Other (Specify)								
SCREEN OR PERFORATION OPENINGS ARE:								
☐ Continuous Slot Mill Slot • CAD☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)								
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)								
SCREEN-PERFORATED INTERVALS: From								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From								
Septic Tank		ateral Lines	☐ Pit Privy	П	Livestock Pen	s □ Insectio	cide Storage	
☐ Sewer Lines	☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well							
₩ Watertight Sewer Lines								
☐ Other (Specify) Direction from well? NOUTH Distance from well? 40 ft.								
10 FROM TO		ITHOLOGI		FROM			r PLUGGING INTERVALS	
	FILL D		c LUG	FROM	10 1	21110. LOG (cont.) 01	LI LUUUINU IN IEKVALS	
9 3 3 36			TO TANSTI	CKX			+ ************************************	
36 63		FINE T		15				
63	CLAY'	GRAY						
				Notes:				
								
11 CONTRACTORS	OD I ANIDO	WNEDS	PEDTIFICATION	V. Thisat-	- woll Ki	Constructed D	ongtmioted as District	
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (moday year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No.								
Kansas Water Well Con	tractor's Lice	nse No	This W	ater Well Red	cord was com	pleted on (mo-day-v	ear) 06-10-15	
under the business name	of PLS.1	11.02.6.R	ez. Pump. S	ERVICE	•••••			
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, Burcau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.								

KSA 82a-1212

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Visit us at http://www.kdheks.gov/waterwell/index.html