

WATER WELL RI		VV VV C-3			ion of Water		W 11 ID			
		ge in Well Use			rces App. No.		Well ID	N. 1		
1 LOCATION OF WA	Fraction	1/	Section	on Number	Township Numb		ge Number			
County:			/4 1/4	D	1 4 1 1 1	T S	R	□ E □ W		
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance an direction from nearest town or intersection): If at owner's address, check here.										
Address:			direction I	rom nea	arest town or in	tersection): If at owne	r s address, c	:neck nere:		
Address:										
City:	State:	ZIP:								
3 LOCATE WELL	4 DEPTH OF COM	(PI FTFD WFI I •		ft	5 Lotitud	n•		(daaimal daamaaa)		
WITH "X" IN	Depth(s) Groundwater									
SECTION BOX:		3) ft., or 4)								
N	WELL'S STATIC WA									
	☐ below land surface.				GPS (unit make/model:)					
NW NE	above land surface,	, measured on (mo-day	y-yr)	····· (WAAS enabled? Yes No)						
	Pump test data: Well w				☐ Land Survey ☐ Topographic Map					
W E		s pumping			Online Mapper:					
SW X-SE		vater was								
	after hours pumping gpi Estimated Yield:gpm			6 Elevation :ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter:		ft. and							
mile		in. to			[☐ Other				
7 WELL WATER TO	BE USED AS:				•					
1. Domestic:	5. ☐ Public Wa	ater Supply: well ID			10. □ Oil F	ield Water Supply: 1	ease			
☐ Household	6. Dewatering: how many wells?									
Lawn & Garden	7. 🔲 Aquifer Ro				d Uncased					
Livestock		g: well ID				mal: how many bore				
2. Irrigation	9. Environmenta									
3. ☐ Feedlot 4. ☐ Industrial	☐ Air Sparge ☐ Recovery		Extraction			r (specify):				
Was a chemical/bacteri		ntted to KDHE?	」Yes □	No I	If yes, date s	ample was submitte	ed:	•••••		
Water well disinfected?		g = 0.1		A CINIC	C LODIEC I	7 01 1 7 01		1 🗆 📨		
8 TYPE OF CASING								I ∐ Threaded		
Casing diameter						er in. to ss or gauge No				
TYPE OF SCREEN OR			108.	./11.	wan unckne	ss of gauge two	••••••			
	less Steel				□ Other	(Specify)				
	anized Steel	_	used (open	hole)		(Specify)				
SCREEN OR PERFORA			` 1	,						
						Other (Specify)				
☐ Louvered Shutter	☐ Key Punched ☐ W	rire Wrapped ☐ S	Saw Cut		ne (Open Hole	e)				
SCREEN-PERFORATED INTERVALS: From										
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft.										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
		ft., From	ft. to	• • • • • • •	ft., From	ft. to	ft.			
Nearest source of possible Septic Tank	e contamination: Lateral Line	es 🔲 Pit Privy		Пτ	ivestock Pens	□ Incocti	cide Storage			
Sewer Lines	☐ Cess Pool	Sewage L	agoon		uel Storage		oned Water \			
☐ Watertight Sewer Line										
☐ Other (Specify)										
Direction from well?			well?							
10 FROM TO	LITHOLOG	GIC LOG	FROM	M	TO L	THO. LOG (cont.) o	r PLUGGIN	G INTERVALS		
			NT a 4 s =							
Notes:										
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged										
under my jurisdiction an	d was completed on (m	no-day-vear)	11113 V	and th	is record is t	rue to the best of m	ny knowleds	ge and belief.		
Kansas Water Well Cont	tractor's License No	This W	ater Well	Reco	rd was comp	leted on (mo-day-y	ear)			
under the business name	of									
KC Dame of CTT 12	Send one copy to WATER W	ELL OWNER and retain	one for you	r record	ds. Fee of \$5.00) for each <u>constructed</u> w	ell.	705 007 2575		
KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.										

KSA 82a-1212 Visit us at http://www.kdheks.gov/waterwell/index.html



WWC-7

KANSAS DEPARTMENT OF HEALTH & ENVIRONMENT

ASSIGNMENT OF WATER WELL TO LANDOWNER

I, _Art Pember	of	13495 100 R	d
			er's address)
Ness City KS (City) (State) the SE quarter of the NW	(Zip)		a water well is located in 18, Township 17,
Range 29 E x W,	in Lane	County, K	Cansas which is approxi-
mately feet north	south, and	feet east/west of	the apparent Lat 38.57
section corner. The water we	ell was drilled in <u>Fet</u>	oruary/2015	(month/year).
I hereby request that	Larson Engineeri (Operator n		leave the water well,
which was drilled by Tem	porary Water Perm	it # <u>20150069</u>	, unplugged, and
I will assume all responsi	bility for the plugg	ing of said water w	ell in accordance with the
requirements of the Kansas I	Department of Health	n and Environment re	gulation K.A.R. 28-30-7.
LANDOWNER: (Signature)	4-16-15 (Date)		arson 4-20-15 Schwa Wydziak (Date)
PRT PEMBER (Print)		By: Thomas	LAKEDA WOYDEINK
IF ADDITIONAL LANDO'	WNER		RECEIVED
(Signature)	(Date)		APR 22 2015
(Print)			BUREAU OF WATER