WATER WELL R		WWC-5		ision of Water			MW-7	
Original Record		ge in Well Use		ources App. No.	T	Well ID		
1 LOCATION OF WA	ATER WELL:	Fraction	1	tion Number	Township Numb		ge Number	
County: Ness	SW14 NE 14 NW 1							
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and								
Business: KDHE		direction from nearest town or intersection): If at owner's address, check here:						
Address: 1000 SW J	044 11-41- 1	Anim OA						
Address:	214 North N	Main St.						
City: Topeka	State: KS	ZIP: 66612						
3 LOCATE WELL	4 DEPTH OF COM	5 I atituda	5 Latitude: 38.441713 (decimal degrees)					
WITH "X" IN	Denth (a) Consum description	Engaportanado 1) 2			le: -99.688			
SECTION BOX: Depth(s) Groundwater Encountered: 1)25.0 ft. 2)					le: 1 Datum: WGS 8	18.1(decimal degrees)	
N	WELL'S STATIC WA						33 LI NAD 21	
below land surface, measured on (mo-day-yr)					r Latitude/Longitude		`	
1 1 1 1		☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)						
NW NE	NW NE - Dabove land surface, measured on (mo-day-yr)				Land Survey Topographic Map			
W L	after hour	Lanu	Online Mapper:					
W X E	Well	LI Onna	C) Offine Wapper					
SW SE	after hour		0405.00					
	Estimated Yield:	6 Elevation: 2125.36 ft. Ground Level TOC						
S	Bore Hole Diameter:	Source:	Source: Land Survey GPS Topographic Map					
mile	Bore Hore Diameter		☐ Other					
1 mile in. to ft.								
1. Domestic:		ater Supply: well ID		10 🗆 Oil Ei	eld Water Supply: le	ease		
Household								
				. 11. Test Hole: well ID				
□ Lawn & Garden 7. □ Aquifer Recharge: well ID □ Livestock 8. ■ Monitoring: well ID				12. Geothermal: how many bores?				
2. Irrigation					a) Closed Loop Horizontal Vertical			
3. Feedlot					b) Open Loop Surface Discharge Inj. of Water			
4. Industrial			Latiaction					
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								
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 ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)								
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)								
SCREEN-PERFORATED INTERVALS: From 35.0 ft. to 45.0 ft., From ft. to ft., From ft. to ft.								
GRAVEL PACK INTERVALS: From 33.0 ft. to 45.0 ft., From ft. to ft., From ft. to ft.								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other.								
Grout Intervals: From								
Nearest source of possible contamination:								
Septic Tank								
Sewer Lines	☐ Cess Pool	Sewage L		Fuel Storage		oned Water V	Wall	
☐ Watertight Sewer Lin				Fertilizer Storage		ell/Gas Well	NEII	
Other (Specify)				rounzer Storag	C LI Oli We	m/Gas Well		
Direction from well?					Д			
10 FROM TO	LITHOLO		FROM		ΓΗΟ. LOG (cont.) or		ZINTEDWALC	
		OIC LUG	TRUM	10 LI	LITO, LOG (CONL.) OI	LUUUIN	JINIERVALO	
	Silt, brown, damp	IA!_		 	 	 		
	clay, brown, moist, pl					 		
	Sandy Clay, light brow						·····	
	<u>Sand, light brown, cla</u>							
26 45 S	and, light brown, fine	e, wet						
	-							
			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) 1.23-2920 and this record is true to the best of my knowledge and belief.								
Kansas Water Well Contractor's License No. 604 This Water Well Record was completed on (mo-day-year) .2.2								
under the business name of Environmental Priority Service, Inc. Signature Time Water with Record was constituted in (into-day-year) 22/22/22/22/22/22/22/22/22/22/22/22/22/								
Mail I white conv alor	ng with a fee of \$5 00 for ea	ch constructed well to: K	ınsas Denartment	of Health and Fry	ironment Bureau of W	ater, GWTS S	ection.	
Mail 1 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.kdhcks.			KSA 82a-12				7/10/2015	

