WATER WELL R		WWC-5		sion of Water		MVV4			
Original Record		e in Well Use		arces App. No.		Well ID			
1 LOCATION OF WA	ATER WELL:	Fraction		ion Number	Township Number	Range Number			
County: BARTON		NW14 NE 1/4 NW 1/2		32	T 19 S	R 13 □ E ■ W			
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 JACKSON ST. Address: 3010 RAILROAD AVE									
City: TOPEKA State: KS ZIP: 66612 GREAT BEND, KS 67530									
2 LOCATE WELL									
WITTH "V" IN 4 DEPTH OF COMPLETED WELL:									
WITH "X" IN SECTION BOX:	Depth(s) Groundwater Encountered: 1)ft.				Longitude: 98.78022 (decimal degrees)				
	2)					Horizontal Datum: ■ WGS 84 □ NAD 83 □ NAD 27			
	WELL'S STATIC WA	TER LEVEL: 10	.09 ft.		r Latitude/Longitude:				
	below land surface, measured on (mo-day-yr)3/29/22				GPS (unit make/model:)				
NW NE	☐ above land surface			(WAAS enabled? TY					
	Pump test data: Well v	vater was	ft.		■ Land Survey Topographic Map				
W E		s pumping		☐ Online Mapper:					
SW SE	Well v								
	after hours pumping gpm				n. 1853.22 A F	Ground Level = TOC			
	Estimated Yield:gpm				6 Elevation: 1853.22ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map				
S	5 Doing to the Distriction of the Control of the Land					Source: Land Survey GPS Group Topographic Map			
7 WELL WATER TO BE USED AS:									
1. Domestic:		nter Supply: well ID ng: how many wells?			ield Water Supply: lease				
Household	11. Test Hole: well ID								
☐ Lawn & Garden ☐ Livestock 7. ☐ Aquifer Recharge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical					
					nal: how many bores?.				
2. Irrigation					a) Closed Loop Horizontal Vertical				
3. Feedlot	☐ Air Sparg		Extraction		Loop Surface Disch				
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									
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other									
Casing diameter									
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No. SCH 40									
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									
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)									
SCREEN-PERFORATED INTERVALS: From .5 ft. to .15 ft., From ft. to ft. to ft.									
GRAVEL PACK INTERVALS: From 3. ft. to 15. ft., From ft. to ft., From ft. to ft.									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Concrete Surface Completion 0-1									
Grout Intervals: From									
Nearest source of possible contamination:									
Nearest source of possible contamination: Septic Tank									
☐ 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? WEST Distance from well? 20. ft.									
10 FROM TO	LITHOLO		FROM			LUGGING INTERVALS			
	SAND	310 100	I KOIVI	TO LI	TITO. LOG (CORE.) OF F	DOGGING INTERVALS			
- 19 19	L		 						
			+			····			
									
									
Notes: A6-005-40222									
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) 3/28/22 and this record is true to the best of my knowledge and belief.									
Kansas Water Well Contractor's License No. 585. This Water Well Record was completed on (mo-day-year) 46/22. under the business name of ASSOCIATED ENVIRONMENTAL INC. Signature									
under the business name	e of ASSUCIATED E	<u> WANKONMENTAL</u>	JINGSig	gnature					
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	s.gov/waterwell/index.html		KSA 82a-12	12		Revised 7/10/2015			

