WATER WELL R Original Record			ion of Water rces App. No.		Well ID		
1 LOCATION OF W	ATED WELL. Fraction	Sacti	on Number	Township Number			
	herson SE 1/4 NE 1/4 SW	1/4 56/4	20	S D T	R 5 □ E 2 W		
WELL OWNER: Last Name: Business: Magellan Ammonia Pipeline Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:							
Address: Our Williams Center From Arrowhead Rd. & EI Ave. Swot Inngy. KS							
Address: MB/29 City: Tuls9	State: OK ZIP: 74172	90 NZ	mls. on	15t Ave. 4 E	into		
3 LOCATE WELL	4 DEPTH OF COMPLETED WELL	,	7	38.2059			
WITH "X" IN	Depth(s) Groundwater Encountered: 1)		5 Latitude	10-97, 9013	(decimal degrees)		
SECTION BOX:	2) ft. 3) ft., or 4		Datum: WGS 84 NAD 83 NAD 27				
	WELL'S STATIC WATER LEVEL:		Source for Latitude/Longitude:				
NW NE	□ below land surface, measured on (mo-day-yr) □ above land surface, measured on (mo-day-yr)		☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)				
	Pump test data: Well water was ft.		☐ Land Survey ☐ Topographic Map				
W	after hours pumping gpm Well water was ft.		☑ Online Mapper:				
sw se	after hours pumping gpm		C 1771 42	1571 0	52 C		
S	Estimated Yield:gpm Bore Hole Diameter:		6 Elevation:				
1 mile	Bore Hole Diameter: in. to	Other Google Farth					
7 WELL WATER TO BE USED AS:							
1. Domestic:	5. Public Water Supply: well ID				ease		
☐ Household ☐ Lawn & Garden	6. ☐ Dewatering: how many wells? 7. ☐ Aquifer Recharge: well ID	11. Test Hole: well ID					
☐ Livestock		7. ☐ Aquifer Recharge: well ID			12. Geothermal: how many bores?		
2. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: wel ☐ Air Sparge ☐ Soil Vapo	a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. Industrial	Recovery Injection						
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 height above land surface							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☑ PVC ☐ Other (Specify)							
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							
GRAVEL PACK INTERVALS: From							
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other							
Grout Intervals: From							
☐ Septic Tank	☐ Lateral Lines ☐ Pit Priv		ivestock Pens		cide Storage		
Sewer Lines	☐ Cess Pool ☐ Sewage		Tuel Storage		oned Water Well		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well ☑ Other (Specify) □ Ammonia □ Line □ Direction from well? □ Distance from well? □ Oil Well/Gas Well							
Direction from well?				ft			
10 FROM TO	LITHOLOGIC LOG	FROM	TO LI	THO. LOG (cont.) or	PLUGGING INTERVALS		
0 5 5 18.5	Brown - Silty Sand Brown - Silty Clay						
18.5 ZO	Brown - Clay						
20 40	Brown - Silty Clay						
		Notes:					
44 CONTRACTIONS ON LANDON MEDIC CERTIFICATION TIL. 11 TV							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \(\mathbb{Z} \) constructed, \(\mathbb{D} \) reconstructed, or \(\mathbb{D} \) plugged under my jurisdiction and was completed on (mo-day-year) . 3./. \(\langle							
Kansas Water Well Contractor's Lucense No (2.17.4) This Water Well Record was completed on (mo-day-year)							
under the business name of							
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.							

KSA 82a-1212

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

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