					ion of Water rces App. No.	1 20.0000				
		VATER WELL:	ge in Well Use				Tarmahin Numb	Well ID	NI	
	y: Stafford	VAIER WELL: .	14 SE 14 SE 1						ige Number 3 □ E ■ W	
	OWNER:	ast Name	First:	Street or Rural Address where well is located (if unknown, distance and						
	Bird Dog		i iist.	direction from nearest town or intersection): If at owner's address, check here:						
Address: 1801 Broadway- Ste 450										
Address: City:	Denver	State: CO	ZIP: 80202	1/2 South, 1 1/4 East of Seward						
3 LOCAT				00.40705						
WITH "		4 DEPTH OF COM							(decimal degrees)	
	ON BOX:	Depth(s) Groundwater	Encountered: 1)	ft.		Longitue	le:98.767	8 <u>6                                    </u>	(decimal degrees)	
1	N	WELL'S STATIC WA	3) ft., or 4)	∐ Dry Well 8 ⊕		Horizonta	ıl Datum: ☐ WGS 84	1 NAD	83 🛘 NAD 27	
			e, measured on (mo-day-yr). 10-10-19				r Latitude/Longitude (unit make/model:		,	
NW	NE	above land surface	, measured on (mo-day	-yr)			(WAAS enabled?			
111	1	Pump test data: Well v	data: Well water was ft.			☐ Land Survey ☐ Topographic Map				
W E aπernot			s pumpinggpm			Online Mapper:				
SWSE well			vater was ft.							
		Estimated Vield	after hours pumping			6 Elevatio	n:ft.	☐ Ground	Level   TOC	
	S	Bore Hole Diameter:	Bore Hole Diameter:10 in. to80 ft. and			Source: Land Survey GPS Topographic Map				
1	mile			in. to ft.			Other			
7 WELL WATER TO BE USED AS:										
1. Domestic		5. Public Wa	ater Supply: well ID	•••••			eld Water Supply: 16			
_	☐ Household ☐ Lawn & Garden ☐ Household ☐ Jewatering: how many wells? 7. ☐ Aquifer Recharge: well ID					11. Test Hole: well ID				
Livest		ecnarge: well ID								
	☐ Livestock 8. ☐ Monitoring: well ID					12. Geothermal: how many bores?				
3.  Feedle		☐ Air Sparg							Ini of Water	
4. 🔲 Indust	rial	☐ Recovery		13. Other (specify):						
Was a chemical/bacteriological sample submitted to KDHE? Tyes No. if yes, date sample was submitted.										
Water well disinfected? ■ Yes □ No										
8 TYPE OF CASING USED: D Steel DVC D Other CASING LODITS. DCI 1 DCI 1 DCI 1 DCI										
Casing diameter 5 in. to 80 ft., Diameter in. to ft.  Casing height above land surface 18 in. Weight SDR-26 lbs/ft. Wall thickness or gauge No										
Casing height above land surface										
1 TPE 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 80 ft to 60 ft From ft to 6 From 8 to 6										
GRAVEL PACK INTERVALS: From80 ft. to20 ft., From ft. to ft. From .										
GROUL WALEKIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From										
Continue Tout										
Septic Tank  Lateral Lines  Pit Privy  Livestock Pens  Insecticide Storage  Sewar Lines										
☐ Watert	ight Sewer Li	nes	1 1 CCUVAR			ertilizer Storage	e ☐ Oil We	Il/Gas Well	, ch	
Direction from well?  Distance from well?  ft.										
10 FROM	TO T	LITHOLOG	Distance from w	FROM	·····				O. D. Imperior	
0		Sandy top soil	IIC LUG	FROM	+	TO LIT	THO. LOG (cont.) or	PLUGGIN	JINTERVALS	
2		Gray clay			+-					
10		Sandy, tan clay			_			REC	EIVED	
42	57	Fine sand & small gra	vel	<del> </del>	+		****			
57	59	Tan clay			$\top$			DEC 2	3 2019	
59	80	Sand & gravel							2 2010	
	Notes:						BUREAU OF WATER			
11 CONTRACTOR'S OR LANDOWNERS CERTIFICATION (TILL)										
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) 10-10-19 and this record is true to the best of my knowledge and ballief										
under my jurisdiction and was completed on (mo-day-year)										
unuci uic u	usiness nam	e ortypachclankt	241116.5(((1))6		Sign:	ature Cス		<u>e</u>	1	
wall 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.gov/waterwell/index.html  KSA 82a-1212  Revised 7/10/2015										
NO GE (III)	AGHER	grace of States Well (IndeX, HgHl		130H 04d-	1414			<u> </u>	7/10/2015	