WATE	K WELL	RECORD	rorm v	W W C-3				urces; App. No.		
County:		WATER WELL: Reno	SW 1/4	NE ¼ S	W ¼	16		Township Number T 22 S	R 4 W	
Distance and direction from nearest town or city street address of well if Global Positioning System (decimal degrees, min. of 4 digits)										
located within city? 115 N Main St, Buhler, KS Latitude: N 38.13546° Longitude: W 97.77100°										
2 WAT	ER WELL	OWNER: KDHE		E	Elevation:	evation: RIM: 1483.34; TOC: 1482.90				
RR#, St. Address, Box # : 1000 SW Jackson Blvd						Datum: WGS84				
City,	State, ZIP C	Code : Topeka	KS	I	Data Collection Method: legal survey					
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 25.09 ft.										
LOCATON WITH AN "X" IN Depth(s) Groundwater Encountered 1 SECTION BOX: WELL'S STATIC WATER LEVEL 17.70 ft. below land surface measured on mo/day/yr 7/2/13										
WITE	I AN "X"]	N Depth(s) Group	dwater Encou	ntered 1			ft. 2	ft. 3	ft.	
1	TON BOX	: WELL'S STA	TIC WATER I	EVEL 1	7.70 ft.	below lan	d surfa	ce measured on mo/d	av/vr 7/2/13	
	N	Pumi	test data: W	ell water w	as	ft. a	after	hours pumpi	ng gnm	
	T 1	T Est Yield	gnm: W	ell water w	/as	ft. :	after	hours pumpi hours pumpi	ng grm	
	v NE -	WELL WATE	TO BE USE	DAS: 5 P	uhlic wat	er sunnly	8 Air	conditioning 11 Ir	niection well	
'''	' '\f	1 Domestic 3	Feed lot 6.0	Oil field w	ater suppl	v v	9 Dews	atering 12 Oth	er (Specify below)	
W 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well									or (opecity below)	
										Was a shamical/hasterial scient sample submitted to Department? Very No. V. If yes mar/day/was
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs										
S Sample was submitted Water Well Disinfected? Yes No X										
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded										
1 St	eel	3 RMP (SR) 6	Asbestos-Cem	ent 9	Other (s)	pecify bel	ow)	Welde	d	
(2)PVC 4 ABS 7 Fiberglass Threaded X										
Blank casing diameter 2 in. to 10.09 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.44 ft., Weight lbs./ft. Wall thickness or gauge No.										
Casing height below land surface 0.44 ft., Weight lbs./ft. Wall thickness or gauge No.										
TYPE OF SCREEN OR PERFORATION MATERIAL:										
1 Steel 3 Stainless steel 5 Fiberglass (7) PVC 9 ABS 11 Other (specify)										
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass (7) PVC 9 ABS 11 Other (specify) 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)										
2 Louvered shutter 4 Key nunched 6 Wire wrapped 8 Saw Cut 10 Other (specify)										
1 Continuous slot (3) Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 10.09 ft. to 25.09 ft. From ft. to ft.										
	1 220 010		From		ft. to		ft. Fro	om ft. to	ft ft	
From ft. to ft. From ft. From ft. To ft. From ft. To ft. From f										
-			From		ft. to		ft. Fro	om ft. to	f	
CONTENTATEDIAL 1 Nest compet 2 Compet group (2 Description (2 October Compete of 1 Competer of 1 Com										
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-1 feet Grout Intervals From 1 ft. to 8 ft. From ft. to ft. From ft. to ft.										
What is the percent source of possible contemination:										
What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify)										
		5 Cess pool		$\overline{}$					16 Other (specify below)	
2 Sewer lines 5 Cess pool 8 Sewage lagoon (11) Fuel storage 14 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well										
	from well?		n y roody are		ow many i			Well Bus Well		
FROM	TO		OGIC LOG		FROM	ТО		PLUGGING INTE	DVAIC	
0	15	Brown silty clay	OGIC LOG		FROM	10		PLUGGING INTE	KVALS	
15	25.39	Tan silty clay								
		, and only only								
		1111						12.00		
							Flushm	ount waiver from B	ow	
							$\overline{}$		- Contrary (
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged										
under my jurisdiction and was completed on (mo/day/year) Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 7/23/13										
			757 .				mpleter	on (molday/year)7/	23/13	
		of Larsen & Asso			y (signatur		\rightarrow			
INSTRUCT Geology Sec	IONS: Please	till in blanks or circle the	correct answers.	Send top thro	ee copies to	Kansas Dep 5-296-5522	artment d	Health and Environment	, Bureau of Water, VER and retain one for	
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send of the WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.										