WATER		Division of Water										
		Correction			Resources App. No.				Well ID			
1 LOCATION OF WATER WELL: Fraction SW 1/2 NW 1/2					ABAZ 1/	Section Number Township Number Range Number 7 SE 4 35 T 23 S R 2 D E						
		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:	1	Approx. 50' NW of intersection of West 1st St. & Poplar										
Address: City:	Lieletood		State: Ks.	ZIP:		approx. 30 1444 of intersection of 440st 1st St. 4.1 spice						
2 LOCATE WELL							T		20 0055			
WITH "X" IN SECTION POY. Depth(s) Groundwater Encountered: 1).						20.2 ft. 5 Latitude: 38.00559 (decimal degrees) 20.2 ft. Longitude: -97.50903 (decimal degrees)						
				3) ft.,		Dry Well Horizontal Datum: ☐ WGS 84 ■ NAD 83 ☐ NAD 27					(decimal degrees)	
	·			TER LEVEL:		Source for Latitude/Longitude:						
		☐ below l	below land surface, measured on (mo-day-y				GPS (unit make/model:)					
NW	NE		above land surface, measured on (mo-day-y Pump test data: Well water was				(
w	E	after hours pumping g					☐ Land Survey ☐ Topographic Map ☐ Online Mapper:					
1 1 1	X	Well water was ft.										
sw	SE	after	after hours pumping g				om 6 Elevation: 1391.34ft. ☐ Ground Level ☐ TO					
	S	Bore Hole I	Estimated Yield:gpm Bore Hole Diameter: 8.25 in to 40						GPS T	opographic Map		
1 r		Boile Hole E	in. to									
7 WELL	WATER TO	O BE USED A										
1. Domestic:				ter Supply: we					eld Water Supply: le			
☐ Housel☐ Lawn d		6. ☐ Dewatering: how many wells? 7. ☐ Aquifer Recharge: well ID										
Livesto		/. L 8. ■	l Monitorin	g: well ID	MW	/-8			al: how many bores			
2. Irrigati			9. Environmental Remediation: well ID.						Loop Horizont			
3. Feedlo			Air Sparge	_	Vapor E	xtraction			Loop Surface Di			
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 2 in. to 30 ft., Diameter in. to												
Casing diameter 2 in to 30 ft., Diameter in to ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 0 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 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 30 ft. to 40 ft., From ft. to ft., From ft. to ft.												
GRAVEL PACK INTERVALS: From 28 ft. to 40 ft., From ft. to ft., From ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From 6, ft. to 6, ft.												
Nearest source of possible contamination:												
☐ Septic			Lateral Line			_	Livestock Pe			cide Storage		
Sewer I		_	Cess Pool		wage Lag		Fuel Storage			oned Water II/Gas Well		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Welt/Gas Welt □ Other (Specify)												
Direction from well? ft.												
10 FROM	TO		ITHOLOG			FROM			HO. LOG (cont.) or			
0		Topsoil, silty	clay loan	n, brown, mo	ist	24			id, gray to orang	e, fine to	medium, wet,	
1		organic Silty Clay, da	ork brown	ctiff dny		 		satt	urated @ 24'			
6												
10	15		Clay, brown, stiff, some silt Clay, light brown, soft, moist, trace sandy									
15		Sandy Clay,			Janey							
16	22	Clay, gray, s		Notes:								
22	24	Sandy Clay,	gray, stiff	f, moist								
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
11 CONT	RACTOR'S	S OR LANDO	OWNER'S	S CERTIFIC	ATION: 9/10/15	This wate	r well was	CC	onstructed, reco	instructed,	or ∐ plugged ge and belief	
Kansas Wa	arisulction a ter Well Co	ntractor's Lice	ense No. 6	10-uay-year).	This Wat	er Weli Red	ord was cor	nple	ted on (mo-day-ye	ear) . i.o.	2.7/./5	
under the b	usiness nam	ne of Environ	mental P	nonty Servic	æinc	Si	gnature?		(.A. 77			
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.												
		St., Suite 420, Top is gov/waterwell/i		66612-1367. Ma		/ater Well Own CSA 82a-12		ne to	r your records. Teleph	One 785-296-	-5524. 1 7/10/2015	
L visit us at Hill	ALL SAN W. NUMCK	o governatel weller	1105-2-110111		I	ULQ-12						