WATER WELL RE	Division of Water								
X Original Record Correction		Change in Well Ust		· Resources App. No.			Well ID	MW6	
I LOCATION OF County Kearny	WATER WELI	L:	Fraction NW ¼ SE ¼	SW ¼ SE	Section Numb	er Township Nur T 24	_	Number 6 EXW	
2 WELL OWNER:	Street or Rural Address where well is located (if unknown, distance and direction								
Business: KDHE Address: 1000 SW Jackson Blvd				from nearest town or intersection): If at owner's address, check here: 109 E. Santa Fe Trail Blvd., Lakin, KS					
Address:	109 E. Sama re i	raii Bivd., Lakin, K	.5						
City To To Control of the Control of		tate: KS	ZIP: 66612						
WITH "X" IN	Depth(:	S) Groundwater F	MPLETED WELL: Encountered: 1)	35ft	5 Latitude: Longitude	101 26		cimal degrees) cimal degrees)	
SECTION BOX:	1				Dry Well Horizontal Datum: WGS 84 X NAD 83 NAD 27				
				2.77 ft. Source for Latitude/Longitude:					
	X below land surface, measured or above land surface, measured or				GPS (unit make/model: )  (WAAS enabled? Yes No)				
NW NE	Pumi	p test data: Well	water was	ay-yı) ft	X Land Survey Topographic Map				
w	E a	after hours pumping gpm			Online Mapper				
	la		nter well was ars pumping	ft enm	6 Elevation 3007.36 ft Ground Level X TOC				
SW — SE	Estin	stimated Yield:gpm			Source X Land Survey GPS Topographic Map				
	Bore	re Hole Diameter: 7.25 in to ft, and			Other				
			in to	ft					
7 WELL WATER TO BE USED AS:									
1 Domestic: Household	_	Public Water Sup				Vater Supply: lease	e		
Household 6 Dewatering: how many wells?  Lawn & Garden 7 Aquifer Recharge: well ID				11 Test Hole: well ID					
Livestock 8 X Monitoring: well ID MW6				Cased Uncased Geotechnical  12 Geothermal: How many bores?					
2 Irrigation		a) Closed Loop Horizontal Vertical							
3   Feedlot					b) Open Loop Surface Discharge Inj. of Water				
			Injection		Other (spe				
Was a chemical/bacteriological sample submitted to KDHE? Yes X No If yes, date sample was submitted:  Water well disinfected? Yes X No									
8 TYPE OF CASING USED: Steel X PVC Other CASING JOINTS: Glued Clampled Welded X Threaded Casing diameter 2 in. to 20 ft Diameter in to the Diameter in the Casing diameter S in the Casing diameter									
in, to it, Dianiclei in, io									
Casing height above land surface -0.36 in. Weight lbs./ft. Well thickness or gauge No TYPE OF SCREEN OR PERFORATION MATERIAL:									
Brass Galvanized Steel Concrete tile None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:									
Continuous Slot X 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 20 ft. to 35 ft, From ft. to ft, From ft. to ft,									
GRAVEL PACK I	NTERVALS: I	rom 18	ft. to 35 ft,		ft. to	n, From	ft. to	ft,	
9 GROUT MATERIAL	: Neat cem		nent grout X Ber	tonite X Oth	er Concrete: 0-0.7		11. 10	1,	
Grout intervals: From		18 ft, Fr			om ft. (		***************************************		
Nearest source of possib		n:	<del></del> 1		,				
Septic Tank Sewer Lines	=	ateral Lines	Pit Privy		estock Pens	Insecticide	U		
Watertight Sewer Lin	<b></b>	ess Pool eepage Pit	Sewage Lagoo		l Storage tilizer Storage		Water Well		
Other (Specity)		eepage i n	recayala	rer	illizer Storage	Oil Well/	Jas Well		
Direction from well? NW			Distance from	well? ~160		ft			
10 FROM TO		LITHOLOG	IC LOG	FROM	ТО	LITHO. LOG (cor	nt.) or PLUGGING	G INTERVALS	
0 0.2 0.2 0.9	Asphalt Gravel with silty	clav							
0.9 12	Clayey silt	only							
12 31 31 35	Medium fine sand	d							
31 33	Clay								
				Notes: KD	HE ID: Palmer O	il Co.; U1-047-151	42		
				Target of m	onitoring well is sh			vas installed at	
the direction of KDHE.  CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was X constructed, plugged under my									
jurisdiction and was completed on (mo-day-year) 8/15/19 and this record is true to the best of my knowledge and belief Kausas World's Well Contractor's									
License No 757 This Water Well Record was completed on (mo-day-year) 9/18/19 under the business name of Larsen & Associates, Inc. Signature									
			h constructed well to: Ka	isas Department of H	ealth and Environme	n Paragraphic Motor	GWTS Section		
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Barcar 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.kc			KSA 82:		-	•		7/10/2015	