			W W C-5		ivision of Water		W-11 ID	MW-34D	
			ge in Well Use		sources App. No.		Well ID		
	FION OF V y: Ford	VATER WELL:	Fraction SE 1/4 SE 1/4 NE 1/4		ection Number 21	Township Numb		ge Number ↓ □ E ■ W	
		T	,						
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance business: Koch Fertilizer Dodge City direction from nearest town or intersection): If at owner's address, check here.									
144 144 144 144 144 144 144 144 144 144								meck nere.	
Address:	Address:								
City: Dodge City State: KS ZIP: 67801									
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL: 145 ft. 5 Latitude: 37.772823 (decim									
WITH "	X" IN		Encountered: 1)10		ii. 5 Lantud	5 Latitude: 37.772823 (decimal degrees)  Longitude: 99.94502 (decimal degrees)			
SECTIO	ON BOX:		3) ft., or 4)			Horizontal Datum: WGS 84 NAD 83 NAD 27			
] 1	N		TER LEVEL:			or Latitude/Longitude:		83 LI NAD 27	
			, measured on (mo-day-			or Latitude/Longitude:		,	
NINV	NE		above land surface, measured on (mo-day-yr			(WAAS enabled? □		,	
NW			vater wasNA f		☐ Land Survey ☐ Topographic Map			0)	
w	X E	after hour	s pumping	gpm		Online Mapper:			
CVV			Well water was ft.			**			
SW	SE	after hour	gpm	6 Flovetic	n. 2546 A	□ Ground	Lavel TTOC		
		Estimated Yield:!\.	Estimated Yield:NAgpm			6 Elevation: 2546			
1	S	Bore Hole Diameter:	Bore Hole Diameter:			Other			
1 mile 1t.									
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID									
1. Domestic			ng: how many wells?						
						11. Test Hole: well ID			
Livest		8. Monitorin	echarge: well ID	-34D	12. Geother	12. Geothermal: how many bores?			
	2. Irrigation 9. Environmental Remediation				a) Close		p    Horizontal    Vertical		
	3. Feedlot Air Sparge Soil Vapor E					b) Open Loop  Surface Discharge  Inj. of Water			
4. Industr		☐ Recovery				r (specify):			
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:									
Was a chemical bacteriological sample submitted to RDTE: Tes To Tryes, date sample was submitted:									
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other									
Casing diameter 2 in to 140 ft Diameter in to ft Diameter in to ft									
Casing diameter									
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									
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)									
SCREEN-PERFORATED INTERVALS: From .140 ft. to .145 ft., From ft. to ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Cement/bentonite grout									
Grout Intervals: From									
Nearest source of possible contamination:									
☐ Septic Tank     ☐ Lateral Lines     ☐ Pit Privy     ☐ Livestock Pens     ☐ Insecticide Storage       ☐ Sewer Lines     ☐ Cess Pool     ☐ Sewage Lagoon     ☐ Fuel Storage     ☐ Abandoned Water Well									
□ Sewer Lines     □ Cess Pool     □ Sewage Lagoon     □ Fuel Storage     □ Abandoned Water Well       □ Watertight Sewer Lines     □ Seepage Pit     □ Feedyard     ■ Fertilizer Storage     □ Oil Well/Gas Well									
Other (Specify)									
Direction from well?									
10 FROM	ТО	LITHOLO		FROM		THO. LOG (cont.) or		GINTERVALS	
0	50	silty clay						17-70	
50	62	caliche		Ì					
62	140	silty sand				*******			
140	143	clay with some sand							
143		sand					****		
149	155	shale						***************************************	
				Notes:				***************************************	
		Market and the second s	Alexandra A	1					
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) 07/25/2015 and this record is true to the heart of the heart									
Kansas Water Well Contractor's License No. 193. This Water Well Record was completed for Ano-day-year 12494/2015									
under the b	usiness nan	ne of Cahox Pump			Signature				
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.									
						for your records. Telepho			
Visit us at http	o://www.kdhel	s.gov/waterwell/index.html		KSA 82a-1	212		Kevised	7/10/2015	