	R WELL P						vision of Wate				
	al Record [Re:	sources App. Nection Numbe		Well ID	ge Number	
Count	tv: Som	On me	دعک	Fraction	1/V /V	5 1/2 30	ction Numbe	T 27	S R	ige Number □ E N W	
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and											
direction from hearest town or intersection): 11 gl owner's address, check here:											
Address 1040 1 Colone											
City: Constant State: Na Zir:											
3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL: 4 DEPTH OF COMPLETED WELL: 5 Latitude: (decimal degrees)											
Depth(s) Groundwater Encountered: 1) ###								Longitude:(decimal degrees)			
2) ft. 3) ft., or 4) Dry						Dry Well	y Well Horizontal Datum: WGS 84 NAD 83 NAD 27				
I	WELL SSIAIIC WAILE LEVEL						Source	for Latitude/Longitu	ıde:		
	below land surface, measured on (mo-day-y above land surface, measured on (mo-day-y						GPS (unit make/model:				
NW	above land surface, measured on (mo-day-yr Pump test data: Well water was						(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map				
w tix						gpm	Online Mapper:				
	well water was It.										
	Fetimeted Vield:						6 Elevat	ion:	.ft. 🖂 Ground	Level [7 TOC	
	S Bore Hole Diameter:				20	. ft. and		: Land Survey [
1	mile			in. to)	ft.		☐ Other			
7 WELL WATER TO BE USED AS:											
1. Domestic				ter Supply: v				Field Water Supply:			
, ,	☐ Household 6. ☐ Dewatering: how many wells?						11. Test Hole: well ID Geotechnical				
1 7-	Livestock 8. Monitoring: well ID							12. Geothermal: how many bores?			
1	2. Irrigation 9. Environmental Remediation: well ID							a) Closed Loop Horizontal Vertical			
1 -	3. Feedlot Air Sparge Soil Vapor Extraction							b) Open Loop Surface Discharge Inj. of Water			
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 'ANO 8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other											
Casing diameter											
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 ☐ 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											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Sentonite Other.											
Grout Intervals: From											
☐ Septic	Tank		Lateral Lines	s 🗆 P	it Privy		Livestock Pen	s 🔲 Insec	ticide Storage		
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well											
Watertight Sewer Lines											
Other (Specify) Direction from well? Distance from well?											
10 FROM	TO	I	ITHOLOG			FROM		ITHO. LOG (cont.)		INTERVALS	
0	//	Top	مدر_	P	0						
	22		me	tom	1.2.	20					
72	40	Core	Jan.	To	7 - Da	2/					
	ļ										
						Notes:					
11 601/-	D 4 0/702	OD Y AND	>*********	OR DOVE	7 4 MF 63:	771		· · · · · · · · · · · · · · · · · · ·			
under my in	KACTOR'S	OK LANDO	JWNER'S leted on (m	CERTIFI(CATION	I his wate	r well was	constructed, re- true to the best of p pleted on (mo-day-	constructed, o	r [] plugged	
Kansas Wa	ter Well Con	tractor's Lice	ense No	472	This Wat	er Well Rec	ord was com	pleted on (mo-day-	gear) . Z	51.7	
under the b	usiness name	of Bar	reland	1. Pur	m/2.	1/ CR/81	Materie2	James C			
Mail 1 white copy along with a fee of \$5.00 for each constructed well fo: 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											