								sion of Water		W 11 ID		
				Fraction				irces App. No. ion Number		Well ID	aa Mumbar	
1 LOCATION OF WATER WELL:				4 554 5 8 4 5 8 4			Seci	36	Township Numb		ge Number	
County: K. San Ame:					JE/436 /2		r Rur	36 T 27 S R 9 D E X W All Address where well is located (if unknown, distance and				
			2400	First:		direction	from ne	earest town or in	tersection): If at owne	r's address.	check here:	
Business: Kess Construction direction from nearest town or intersection): If at owner's address, check here:   Address: 5830 Sw Drury LN US Hwy 54 & 5w 70 k Ave.												
Address:	_		•				• •		, • ,	7700		
City: Topeka State: KS ZIP: 66604-2262												
3 LOCATE WEI WITH "X" IN	OF COM	IPLETED WELL: 100 ft.				5 Latitude:(decimal degrees)						
SECTION BOX	X: De				ered: 1)				de:			
N	N   2) π.								□ WGS 84 □ NA		AD 27	
		ATIC WATER LEVEL:					or Latitude/Longitude		,			
NW NE	1 1 -	above land surface, measured on (mo-day-yr)						□ GPS	(unit make/model: (WAAS enabled?			
NW NE	Pump test data: Well water was ft.						☐ Land Survey ☐ Topographic Map					
"			hours	s pumpinggpm				Online Mapper:				
l ew l er l l				water was ft.								
altel			hours pumping gpm Yield:gpm					6 Elevation:ft. ☐ Ground Level ☐ TOC				
S Bore Hole Dia			ameter: 10.5/8 in. to					Source:    Land Survey    GPS    Topographic Map				
1 mile				in. to ft.				☐ Other				
7 WELL WATER TO BE USED AS:												
1. Domestic:								10. Oil Field Water Supply: lease				
Household								11. Test Hole: well ID				
				echarge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical				
2. Irrigation	☐ Livestock 8. ☐ Monitoring: well ID							12. Geothermal: how many bores?				
3. Feedlot	<del>_</del>							b) Open Loop    Surface Discharge    Inj. of Water				
4. MIndustrial		☐ Injection 13. ☐ Other (specify): .										
Was a chemical/bacteriological sample submitted to KDHE?  Yes No If yes, date sample was submitted:												
W. 11 11 1 Carl 10 FT V 57 N												
8 TYPE OF CASING USED:       □ Steel □ PVC □ Other												
Casing diameter												
Casing height above land surface												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ 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 Sh	utter 🔲	Key Punch	ed 🔲 W	ire Wrap	pped $\square$ Sa	w Cut		one (Open Hol	e)			
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)  SCREEN-PERFORATED INTERVALS: From □ Co ft. to □ Co ft., From □ ft. to □ ft.												
GRAVEL PACK INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From												
Nearest source of possible contamination:												
☐ Septic Tank	•		ateral Line	s	☐ Pit Privy			Livestock Pens		cide Storage		
☐ Sewer Lines		_	ess Pool		☐ Sewage La	goon		Fuel Storage		oned Water	Well	
□ Watertight Sewer Lines     □ Seepage Pit     □ Feedyard     □ Fertilizer Storage     □ Oil Well/Gas Well       □ Other (Specify)     □ Other (Specify)												
Direction from wel	y) 19	999	•••••	D	istance from w	 ell?		999	ft			
10 FROM TO			THOLOG			FRO			ITHO. LOG (cont.) or		G INTERVALS	
0 5	1 34	p Sci										
5 10		mAll	Signis	l								
16 15	- 2	MAIL	TO 14	ed S	Som I							
15 2		ned u	MIX	of	Corgo SA	~. <u>.</u> /						
20 2			Smi									
25 10	20 1	red .	Shale		Lo Crac	N-4-				<del></del>		
						Note	5.					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, or plugged under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief.												
under my jurisdic	ction and w	as comple	eted on (n	10-dav-1	vear) <b>Z.:.6</b> :	-15	and t	his record is	true to the best of m	y knowled	ge and belief.	
Kansas Water W	ell Contrac	tor's Lice	nse No	<b>6</b> ./ <del></del> .	∴… Inis w	ater we	ц кесс	ora was comp	lieted on (mo-day,)	ear) 6	<b>1</b> 2/5:13	
under the business name of Action Subject Life State Li												
INSTRUCTIONS Departm	: Send one cop ent of Health a	y to WATER ' nd Environme	wELL OWN nt, Bureau of	EK and ret Water, Ge	ain one copy for yo ology Section, 100	ur records.  SW Jacks	Submit on St., Si	ree or \$5.00 for eauite 420, Topeka, I	care constructed were along was ansas 66612-1367. Teleph	ith one (white) o ione (785) 296-3	opy to Kansas 565.	
•		Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.  Visit us at http://www.kdheks.gov/waterwell/index.html  KSA 82a-1212  Revised 9/10/2012										