			WWC-5			ion of Water	30418			
			ge in Well Use			rces App. No.	T 1: N 1	Well ID	NT 1	
1 LOCATION OF WATER WELL: Fraction County: Ford NW1/4 SW1/4 NV				1/4	Section Number Township Number Range Number T 28 S R 22 D E W					
2 WELL			L		et or Rural Address where well is located (if unknown, distar					
Business: direction from nearest town or intersection): If at owner's address, check here:										
Address: Michael DeMuth Address: 12981 Ridge Rd 1/4 mile south of 129rd & Upland rd on east side or four miles SE										
City:	Ford	Idge Rd State: Ks	ZIP: 67842	of Ford I	K s					
3 LOCAT				452		I	27 6116	20		
WITH "X" IN SECTION BOY. Depth(s) Groundwater Encountered: 1)75.										
SECTION BOX: 1 2 90 8 3)			Encountered: 1)	125 ft., or 4) Dry Well			Longitude: -99.685120 (decimal degrees) Horizontal Datum: □ WGS 84 □ NAD 83 ■ NAD 27			
N WELL'S STAT			WATER LEVEL:			Source for Latitude/Longitude:				
		below land surface	below land surface, measured on (mo-day-yr)2/			GPS (unit make/model:)				
NW	NE	☐ above land surface	☐ above land surface, measured on (mo-day-yr)				(WAAS enabled? □			
Pump test data: Well water was					☐ Land Survey ☐ Topographic Map					
			oumping gpm ter was ft.			☐ Online Mapper:				
SW	SE		after hours pumping gpm							
		Estimated Yield: 1500 gnm			6 Elevation:ft. Ground Level TOC					
I	Bore Hole Diameter:27 in. to153 ft.					Source:				
1 mile in. to ft. Uother										
7 WELL WATER TO BE USED AS:										
1. Domestic	<u> </u>									
	☐ Household 6. ☐ Dewatering: how many wells?									
, —	Livestock 8. Monitoring: well ID									
_	2. Irrigation 9. Environmental Remediation: well ID									
	3. Feedlot Air Sparge Soil Vapor Extracti					b) Open Loop Surface Discharge Inj. of Water				
4. 🗌 Industr	rial	☐ Recovery	☐ Injection			13.	(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 16 in. to 113 ft., Diameter in. to ft., Diameter in. to to SDR 26 in. Weight bove land surface 12 in. Weight 15./ft. Wall thickness or gauge No. SDR 26										
Casing height above land surface! in. Weight lbs./ft. Wall thickness or gauge No. SUK 49										
TYPE OF SCREEN OR PERFORATION MATERIAL: □ Steel □ Stainless Steel □ Fiberglass ■ PVC □ Other (Specify)										
☐ 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 ft. to ft., From ft., From ft., From ft. to ft.										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: ■ Neat cement □ Cement grout ■ Bentonite □ Other										
Grout Intervals: From 20 ft. to 18 BEN ft., From 18 ft. to 0CEM ft., From ft. to ft.										
Nearest source of possible contamination: Septic Tank										
Sewer		☐ Cess Pool	☐ Sewage Lag	200n		uel Storage		oned Water	Well	
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well										
☐ Other (Specify)										
									O DITTEDIAL C	
10 FROM	TO	LITHOLOG		FROM			THO. LOG (cont.) or	PLUGGIN	JINTERVALS	
0	15	Top soil clay &fine sar Fine sand	<u>nu</u>	125 142			nd med			
15	30 45	Sand Fine to med & li	Ho day	142	- ' '	60 Cla	ay			
30 45	60	Sand fine to med & iii	lue clay	1	-+					
60	75	Sand coarse		1						
75	90	Sand med	· · · · · · · · · · · · · · · · · · ·	-						
90	105	Sand med Sand coarse & gravel		Notes	L			4		
105	122	Gravel Trees								
122 125 Clay										
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed. Treconstructed. or plugged										
under my jurisdiction and was completed on (mo-day-year) 2/8/16										
Kansas Wa	iter Well Co	ontractor's License No. 2	23 This Wa	ter Well	Reco	rd was comp	leted on (mo-day-y	ear) 2/29/1	6	
under the b	usiness nan	ne of Dunham Drilling	h constructed well to: V	ene D	Sign	nature//jd	When White	oton Curre o	nation	
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.										
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015										