WATER WELL I		WWC-5	Divi	sion of Wate	r	MW3R		
Original Record	Correction Chan	ge in Well Use	Reso	urces App. N	о.	Well ID L		
1 LOCATION OF V		Fraction	Sec	tion Numbe	r Township Numb			
County: BARBER NE 1/2 NW 1/4 NE 1/4 :				SW¼ 12 T 32 S R 12 □ E ■ W				
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and								
Business: KDHE BER direction from nearest town or intersection): If at owner's address, check here:								
Address: 1000 SW JACKSON Address: 201 W. FOWLER, MEDICINE LODGE, KS								
Address: City: TOPEKA	State: KS	ZIP: 66612-1367	.01 **.1 **	VLCIN, IVICE	DICINE LODGE, NO	,		
4 DEPTH OF COMPLETED WELL:								
SECTION BOX:		Encountered: 1)1.				65 (decimal degrees)		
N	2)					4 □ NAD 83 □ NAD 27		
WELL'S STATIC WATER LEVEL:16.53 ft. ■ below land surface, measured on (mo-day-yr)7/11/17.					Source for Latitude/Longitude:			
					GPS (unit make/model:)			
NWNE above land surface, measured on (mo-day-yr)				(WAAS enabled? ☐ Yes ☐ No) ■ Land Survey ☐ Topographic Map				
after hours numning onm				Online Mapper:				
' ^ '	Well water was ft.							
SW SE	after hours pumping							
	Estimated Yield:gpm			6 Elevation: 1478.66 ft. ☐ Ground Level ■ TOC				
_	S Bore Hole Diameter:			Source:				
7 WELL WATER TO BE USED AS:								
1. Domestic: Household	,				10. Oil Field Water Supply: lease			
☐ Lawn & Garden	☐ Household 0. ☐ Dewatering: now many wells?							
Livestock					12. Geothermal: how many bores?			
2. Irrigation					a) Closed Loop Horizontal Vertical			
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extrac				b) Open Loop Surface Discharge Inj. of Water				
4. Industrial	☐ Recovery			13. 🗖 Otl	ner (specify):			
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:								
Water well disinfected? Yes No								
		C Other	CASIN	G JOINTS:	□ Glued □ Clampe	I □ Welded ■ Threaded		
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter 2. In. to								
Casing height above land surface								
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 Bentonite Other Concrete Surface Completion 0 - 0.85								
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								
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well								
☐ Other (Specify) Direction from well?								
10 FROM TO	LITHOLO	GIC LOG	FROM	TO	LITHO, LOG (cont.) or	PLUGGING INTERVALS		
	GRAVEL							
3" 20'	Silty Clay (CL), RED		 					
			ļ					
			37 /					
			Notes:			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) 6/1.9/1.7 and this record is true to the best may coveledge and belief.								
↓ Kansas Water Well Cor	ntractor's License No. 5	085 This Wat	er Well Reco	ord was com	nleted in (modely-ve	2/20/17		
under the business nam	e ofASSOCIONS	1 Environment	Inc Sio	nature	LANGE XL	z are		
Mail 1 white copy ale	ong with a fee of \$5.00 for eac	ch constructed well to: Kans	as Department o	of Health and E	environment, Billear of Wa			
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								

