WATER WELL RECORD			Form W	Div	Division of Water Resources App. No.					
Coun	ty: Mea		Fraction NW 1/4 NE 1/4 NW		Section	n Number 11		Range Number R 28 □E ☑W		
	Street/Rural Address of Well Location; if unknown, distance & direction					Global Positioning System (GPS) information:				
from	from nearest town or intersection: If at owner's address, check here \(\mathbb{Z} \) .					Latitude: (in decimal degrees)				
Mea	Meade Municipal Plant					Longitude: (in decimal degrees)				
623 East Carthage Street, Meade, Kansas 67864						Elevation:				
2 WA'	2 WATER WELL OWNER: Meade Municipal Plant						Datum: WGS 84, NAD 83, NAD 27 Collection Method:			
RR#, Street Address, Box #: 623 East Carthage Street						GPS unit (Make/Model:)				
City,	, State, Z	TD C. I.	Kansas 67864			igital Map/Ph	oto, Topographi	ic Map, \[\] Land Survey		
			Transas or out		Est. Ac	curacy: \square <	3 m, 🔲 3-5 m, 🗀	ic Map, ☐ Land Survey 5-15 m, ☐ >15 m		
3 LOC		LL A DEPUTE OF	COMPLETED MAKE	40						
	H AN "X FION BO	"X" IN 4 DEPTH OF COMPLETED WELL 40								
SEC	N N	$-T_{1}$								
<u> </u>	Pump test data: Well water was N/Aft. after N/A hours pumping, N/A									
1	N/Λ									
w NV	WNE EST. YIELD. IVAgpm. Well water was .IVAtt. after .IVAhours pumping .IVAgpm Bore Hole Diameter 8.25in. to .40ft. and .N/Ain. to .N/Aft.									
''	WELL WATER TO BE USED AS: Public water supply Geothermal Injection well									
50	SW SE Domestic Feedlot Oil field water supply Dewatering Other (Specify below)									
	Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☑ Monitoring well MW-3D.									
<u> </u>	Was a chemical/bacteriological sample submitted to Department? Yes V No									
1	S If yes, mo/day/yr sample was submitted.N/A									
	1 1111116	Water well disir	fected? Yes 🔽	No						
5 TYPE OF CASING USED: Steel PVC Other										
CASING JOINTS: Glued Clamped Welded Threaded										
Casing diameter .2 in. to .15 ft., Diameter .N/A in. to .N/A ft., Diameter .N/A ft.										
Casing height above land surface. 0. in., Weight N/A lbs./ft., Wall thickness or gauge No. Schedule 40										
TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel										
☐ Steel ☐ Stainless Steel										
SCREEN OR PERFORATION OPENINGS ARE:										
☐ Continuous slot										
Louvered shutter Key punched Wire wrapped Saw cut Other (specify)										
SCREEN-PERFORATED INTERVALS: From										
From N/A ft. to N/A ft., From N/A ft. to N/A ft. GRAVEL PACK INTERVALS: From 13 ft. to 40 ft., From N/A ft. to N/A ft.										
GRAVEL PACK INTERVALS: From 19 ft. to 190 ft., From 190 ft. to 190 ft. From 190 ft. to 190 ft. ft. to 190 ft. ft. to 190 ft.										
6 CROUT MATERIAL: Next cement Coment group 17 Departments 27 Other Concrete 0-2 feet										
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Concrete 0-2 feet Grout Intervals: From .2										
What is the nearest source of possible contamination:										
☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below)										
	Sewer li			Z Fuel stora		Abandoned				
Dimos	Watertig	ht sewer lines Seepage por See	oit Feedyard	Fertilizer		☐ Oil well/ga <100-fe				
FROM	TO	LITHOLOG	TC LOG	FROM	TO TO			ICCING INTERVALE		
0	0.5	Gravel	IIC LOO	TACIVI	10	LITTO, LO	or (cont.) or PLC	JGGING INTERVALS		
0.5	7	Clay brown sand coars	a arain							
	1	gravel (fill)	o grani				*			
7	12	clay brown very dry ha	rd					the state of the s		
12	16	clay gray slightly moist				, , ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	· · · · · · · · · · · · · · · · · · ·			
16	40	clay gray moist silty								
						······································				
								The decision of a mile decision of the decisio		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ✓ constructed, ☐ reconstructed, or ☐ plugged										
under my jurisdiction and was completed on (mo/day/year) .10-8-13 and this record is true to the best of my knowledge and belief.										
Kansas Water Well Contractor's License No. 759 This Water Well Record was completed on (mo/day/year) 11-10-13										
under the business name of RAZEK Environmental, LLC by (signature). We (signature) INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send one copy to										
Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367.										
Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at										

http://www.kdheks.gov/waterwell/index.html