WALL	Z AA UTT	L RECU	KU	Form W	MC-2	D1	vision of wate	r Resources App. N		
1 LOCATION OF WATER WELL:			Fraction		Section	on Number	Township No.	Range Number		
County: Comanche			1/4 ne 1/4 sw	¼ ne ¼		15	T 34 S	R 19 □E 🗹 W		
Street/Rural Address of Well Location; if unknown, distar						Global Positioning System (GPS) information:				
	from nearest town or intersection: If at owner's address, check here .						Latitude: .3705.164 (in decimal degrees)			
							Longitude: 99. 21.796. (in decimal degrees)			
2 south and 2 1/2 west of buttermilk							Longitude. 99 (m decimal degrees)			
							Elevation: 1530			
2 WATER WELLOWNER							Datum: WGS 84, NAD 83, NAD 27			
2 WATER WELL OWNER: Dennis Swazey						Collec	Collection Method:			
RR#, Street Address, Box #: HC 65 Box 58						GPS unit (Make/Model: Magellan Meridian)				
City, State, ZIP Code : Coldwater Ks 67029						☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey				
			Oolawa	.5. 1.6 51 525			Est. Accuracy:			
3 LOCATE WELL										
WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 1.1.7										
	SECTION BOX: Depth(s) Groundwater Encountered (1) 30 ft. (2) ft (3)									
1	SECTION BOX: Depth(s) Groundwater Encountered (1).30 ft. (2) ft. (3) WELL'S STATIC WATER LEVEL 20 ft. below land surface measured on mo/day/yr									
Pump test data: Well water wasft. after hours pumping									ay/yl	
I I TOOM YEARTHY TO FE THE TOTAL OF A CO.										
NV	V - N	E E:	EST. YIELD. 5gpm. Well water was							
w	P		Bore Hole Diameter 12.1/4in. to							
1 	WELL WATER TO BE USED AS: ☐ Public water supply ☐ Geothermal ☐ Injection well									
677	/ SI	_ 7	Domestic	☐ Feedlot ☐	Oil field water	er suppl	y \square De	ewatering \(\bigcap \)	Other (Specify below)	
3 4			Irrigation	☐ Industrial ☐	Domestic-lay	vn & ga	rden \square Mo	onitoring well S	tock well	
☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well Stock well Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☑ No										
	S	"						103 110	ļ	
i j es, moracij ji sampte was sasmittea										
1 mile Water well disinfected? ✓ Yes □ No										
5 TYPE OF CASING USED: Steel V PVC Other										
CASING JOINTS: Glued Clamped Welded Threaded										
Casino Jonata. 5 died Clamped Weided I lineaded										
Casing diameter .5										
Casing height above land surface. 30 in., Weightlbs./ft., Wall thickness or gauge Nosdr 17										
TYPE OF SCREEN OR PERFORATION MATERIAL:										
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)										
Brass Galvanized Steel None used (open hole)										
SCREEN OR PERFORATION OPENINGS ARE:										
Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)										
		I shutter	Key punched	Wire wrapped	Saw cut	Oth	er (specify)	(ортино		
Louvered shutter Key punched Saw cut Other (specify) SCREEN-PERFORATED INTERVALS: From 117										
From										
1	ODANI	DI DAGE	TOTAL	F 117	20		it., Fiom		io	
GRAVEL PACK INTERVALS: From										
From ft. to ft., From ft. to ft.										
6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ✓ Bentonite ☐ Other										
Grout In		From .2	9 ft. to	.0 ft From	1	ft. to	ft	From	ft. toft.	
What is	the neare	est source of	nossible conta				,			
	Septic tar				Livestock	nens	☐ Insecticide	storage	her (specify below)	
	Sewer lin		Cesspool	1 2	Fuel storag			d water well	ici (specify below)	
					Fertilizer s		Oil well/ga		e	
				······································						
		u well							ICODIO DITERNALIO	
FROM	TO		LITHOLOG	IC LUG	FROM	TO	LITHO. L	UU (cont.) <u>or</u> PLU	JGGING INTERVALS	
0	70	red shale								
70	80	layered gy	/p / shale	—	1					
80	117	red shale								
		. c c c i aio	· · · · · · · · · · · · · · · · · · ·							

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				NEOCCE STREET, LAND	1					
- ~ ~ ~ ~		2D1C 07 =	I NIE OVVII	AC CONTRACTOR OF THE	NI W					
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) .06/14/11 and this record is true to the best of my knowledge and belief.										
Kansas Water Well Contractor's License No. 665 This Water Well Record was completed on (mo/day/year) .07/28/11										
				ervice Inc.						
									ct answers. Send three copies	
(white, blu	ie, pink) to	o Kansas Depa	rtment of Health	and Environment, Bureau	of Water, Geole	ogy Section	on, 1000 SW Ja	ckson St., Suite 420.	Topeka, Kansas 66612-1367.	
Telephone 785-296-5522. 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.										
KSA 82a-1212 Check: White Copy, I Blue Copy, Pink Copy										