4.0			17/11	LICTULE ILLOC	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
1 LOCATIO	N OF WATER	WELL:	Fraction			Section	on Number		nip Number	Range	e Number	-
County:	Sum	ner	SE 1/4	SW 1/4	NE	1/4	2	T	<b>35</b> s	R	3	W
				ddress of well if								
Approx 3	6' S. 50' W	of SE cor	ner of forme	r Mitchell's A	pco. 24 E	. Central	- Caldwe	11				
					1,3,3,3,3,3,3,3,3,3,3,3,3,3,3,3,3,3,3,3							
	WELL OWNER			04 04- 44	À				and the second		L M	
RR#, St. Add	iress, Box#	: 1000 S	W Jackson	St., Ste. 41	U				Agriculture, Divi	sion of vva	ter Resour	ces
City, State, Z	IP Code	: Topek	a, KS 6661	2				Applicati	on Number:			
LOCATE	WELL'S LOCA	HTIW NOTA	4	COMPLETED V	_ :	20		in mont	1122	93 /TO	C)	İ
<sup>3</sup> AN "X" IN	SECTION BO	)X:	DEPTH OF	COMPLETED	WELL	30	tt. ELEV	ATION:	1133	.33 (10	Y)	
<b>1</b>		i I	TDebin(s) Groun	iowater Encoun	ierea i	24	ft.	2	ft.	3	Herenaner	ft. OFFICE
	NOA/	NE	WELL'S STATI	IC WATER LEV	EL 22.	58 ft. t	elow TOC n	neasured on	mo/day/yr	1(	0/18/13	ດີ
	NW	NE	Dur	np test data: V	Nell water w	ae	fi	after	hours n	umpina	a	om   🗀
e w L	-	:	Ful	iip test data. V	veli water w	20		artor	,,,ouio p	mnina	ات	pm S
∑ W -			Est. Yield	gpm: V	vell water w	as	11	. arter	nouis p	umping _	9	
	į		Bore Hole Diar	meter <b>8.25</b> TO BE USED Attic 3 Feed lot	in. to	30		ft. and	ir 	i. to		ft. ON
	sw	SE	WELL WATER	TO BE USED A	NS: 5 Publ	ic water su	pply	8 Air co	nationing 1	1 Injection	well	,,,,   ~
			1 Domes	tic 3 Feed lot	6 OII 1	ieid water s	supply	9 Dewa	tering 1.	z Oulei (o	pecity bein	,vv)
¥			2 Irrigation	on 4 Industria	ıl 7 Law	n and gard	en (domestic	) 10 Mon	itoring well			
	S			al/bacteriologica								as
									nfected? Yes		No X	ļ
			submitted									—
	BLANK CASI			5 Wrough							ciamped .	
1 Ste	el	_ 3 RMP	(SR)	6 Asbesto	s-Cement	9 Other (	specify belo	w) _	Weld		سنبسبب سببت مسبعه	
2 PV	•	4 ABS		7 Fibergla	SS				Threa	ded	Flush	
										in to		ft
Blank casing	g diameter		in. toi	1 <b>5</b> ft., Dia		ເກ. ແ	·	_ π., Dia		۱۱۱۰ و	CU AO	""
Casing heigh	ht above land s	surface		_in., weight	0.	703	lbs./ft.	Wall thickne	ess or gauge No.	<u>э</u>	CH. 40	
TYPE OF S	CREEN OR PE	ERFORATIO	N MATERIAL:			7	PVC	10	Asbestos-ceme	ent		
1 Ste	el	3 Stain	less steel	5 Fibergla	ISS	8	RMP (SR)	11	Other (specify)			<b>_</b>
2 Bra		4 Galva	nized steel	6 Concret	e tile	9	ABS	12	None used (op	en hole)		ļ
			NGS ARE:		5 Gauzed					11 None	(open hole	e)
		سجندي			6 Wire wr			9 Drilled			• •	
	ntinuous slot		Mill slot	كسست فينسب								
2 Lou	vered shutter	4	Key punched		7 Torch c			10 Other	(specify)			
SCREEN-P	ERFORATED	INTERVALS	S: From	<b>15</b> f	t. to	30	ft. F	rom	ft.	to		n.
			From	f	t. to		ft. I	rom	ft.	to		_ ft.   _
GR	AVEL PACK IN	ITERVALS	From	<b>13</b> f	t. to	30	ft. I	-rom	ft.	to		ft.
0.0	TIVEL TOTAL				t to		A 1	From	ft.	to		ft.
	way to the state of the state o			f	t. to	1						
				2 Cement grou								
Grout Interv	als From	1	ft. to 13	ft. From		ft. f	0	ft. F	rom	ft. to		ft.
What is the	nearest source	of possible	contamination:				10 Lives	tock pens	14 Al	pandoned v	water well	
		o. p			Pit privy		11 Fuel	storage	15 Oi	l well/ Gas	well	
,	• • •		5 Cess pool		Sawage la	anon			16 O	her (sneci	fv below)	Ì
	wer lines					igoon		cticide storage		( <b>-</b> P01	,	ļ
3 Wa	atertight sewer	iines	6 Seepage p	oit 9	Feedyard				Je			
Direction fro							How many	/ teet?	DI LIGONIO I	NITTED VAL		
FROM	ТО	CODE		OLOGIC LOG		FROM	ТО		PLUGGING I	NIERVAL	.5	
0	0.5		oncrete		·						· · · · · · · · · · · · · · · · · · ·	
0.5	14			i brown, some	fine sand							
14	30	S	and									
	1											
	-	<b></b>										
								<u> </u>				
	1	<del>  -</del>				<u> </u>	<del></del>	Survey	date: 10/28/	13		
						-	<del> </del>		: N 37.0326			
						-			de: W 97.60			
		<b></b>				<del> </del>		Luigitu	46. 44 31.00	<u> </u>		
	<u> </u>							<u> </u>	- (0) -1 :		adiation -	
7 CONTR	ACTOR'S OR	LANDOWN	ER'S CERTIFIC	ATION: This wa	ter well was							
completed	on (mo/day/yr)		10	)/18/13					est of my knowle			
	Contractor's L			531					completed on (m			
			Cel E	ngineering,	110							
under the b	ousiness name	OT ====================================	GOI EI	correct answers.	Cond three	price to Van	y (signature)	ont of Health	and Environment	Bureau of V	Vater 1000	sw
lacks	on St., Ste. 420	Topeka Kan	ins and circle tile	Telephone: 913-	296-5545. Se	nd one to W	ATER WELL	OWNER and	retain one for you	ir records.		