WATER WELL RECORD				Division of Water Resources App. No.							
		WATER WELL:		S			Township				
County: Seward NW ¼ NW ¼ NW ¼ NW ¼ NW ¼ NW ¼ NW ¼ NW ¼ NW ¼ NW ¼ NW ¼ NW ¼ NW ¼ NW ¼ NW ¼ NW ¼ NW ¼ NW ¼ Older (GPS) NW ¾ Street/Rural Address of Well Location; if unknown, distance & direction Global Positioning System (GPS) information:											
from nearest toy	n or inte	ersection: If at owner	s address, check here \square .	J	atitude:	Sinoming	System (G	FS) IIIOIII	ianon. (in decimal	degrees)	
a same desired and a microsocion. If at owner standards, effect field in						Latitude: (in decimal degrees) Longitude: (in decimal degrees)					
3 East Railroad St., Liberal, Kansas						Elevation:					
2 WATER WELL OWNER: KDHE T & M							, 🗆 NAD	83 🗆 N	AD 27		
		Box # : 1000 S		=	<u>ratum</u> .	1 11 05 0-	, – 11210	05, 🗖 142	10 21		
City, State, ZIP Code : Topeka, Kansas						GPS unit (Make/Model:					
						☐ GPS unit (Make/Model: ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey					
				E	st. Accura	acv: $\square < 3$	m. 🗆 3-5 m.	5-15 m.	□ >15 m	,,,	
Est. Accuracy: □ <3 m, □ 3-5 m, □ 5-15 m, □ >15 m											
WITH AN "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL 180 ft. Depth(s) Groundwater Encountered (1) ft. (2) ft. (3)										c.	
	DUA:	Depth(s) Ground	water Encountered (1)		^{ft.}	. (2)		tt. (3)		П.	
N N		WELL'S STATI	C WATER LEVEL N	A ft. 1	below lar	nd surface	measured or	ı mo/day/yı	[
X	į l	Pun	ip test data: Well water	was	f	t. after	ho	ours pumpi	ng	gpm	
├ -⋈ฺ̈́₩- ├ -	- NE	EST. YIELD	gpm: Well water	was	f	t. after	ho	ours pumpi	ng	gpm	
WELL WATER TO BE USED AS. DRAIL					er supply Geothermal Injection well						
W						ply Dewatering Dother (Specify below)					
·							_		1V1 VV - 1U		
Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☒ No											
S If yes, mo/day/yr sample was submitted											
1 mile Water Well Disinfected? □ Yes ☒ No											
5 TYPE OF CASING USED: ☐ Steel ☒ PVC ☐ Other											
CASING JOINTS: Glued Clamped Welded Threaded											
Casing diameter 4 in to 150 ft. Diameter in to ft Diameter in to ft											
Casing diameter 4 in. to 150 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 0 in., Weight 2.07 lbs./ft. Wall thickness or gauge No237											
HERE 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)											
□ Louvered shutter □ Key punched □ Wire wrapped ☒ Saw cut □ Other (specify)											
SCREEN-PERFORATED INTERVALS: From 150 ft. to 180 ft., From ft. to ft										ft.	
From ft. to						ft., Fro	om	ft. to)	ft.	
GRAVEL PACK INTERVALS: From 148 ft. to					180	ft., Fro	om	ft. to)	ft.	
Fromft. to						ft., Fro	m	ft. to)	ft.	
6 CROUT M	ATEDI	I. Neat camer	ot 🔽 Cament grout	▼ Ponto	nita	Other					
6 GROUT MATERIAL: ☐ Neat cement ☑ Cement grout ☑ Bentonite ☐ Other Grout Intervals From 0 ft. to 2 ft. From 2 ft. to 148 ft. From ft. to ft.											
What is the near	est sourc	e of possible contam	instion:	IL. U		70 11.			. 11. 10	11.	
Septic ta		Lateral lir		Livestock	nens	□ Insecti	cide storage	По	ther (specif	(v helow)	
☐ Sewer li		☐ Cesspool		Fuel stora			oned water		inci (specii	y ociow)	
☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilize							ll/gas well		taminated	d site	
Direction from well Distance from well											
		LITIO	LOCICIOC				I OC (1	\ DI IIC	CINC INT	TEDMALO	
	ГО	Surface	LOGIC LOG	FROM	TO	LITHO.	. LOG (cont	.) <u>or</u> PLUG	GING IN I	EKVALS	
		Clay									
		Clay w/caliche strl	KS								
		Sandy clay & clay	L								
		Clay w/caliche strl									
		Clay & sandy clay		ļ							
		Clay & caliche w/s									
		Clay w/caliche strl									
		Clay & caliche w/f		 							
		Clay & caliche w/f		NI. TEN		150		7		_1	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \square constructed, \square reconstructed, or \square plugged under my jurisdiction and was completed on (morally/year) 6/2/10 and this record is true to the best of my knowledge and belief.											
Wangan Water 11	ction an	u was completed on (mo/day/year) 0/2/10	7 XX7.11 T							
		ractor's License No.				as complet	ted on (mo/d			W.	
		of Woofter Pump		by (signatu				Cellot		· ·	
INSTRUCTIONS	: Please f	ill in blanks and check the	correct answers. Send three cop	pies (white, b	lue, pink)	to Kansas I	partment of	Health and	Z nvironmen	t, Bureau of	
			te 420, Topeka, Kansas 66612 constructed well. Visit us at hi					WATER WI	ELL OWNE	K and retain	
one for your recor	uo. IIICIU	ac too or about the each	constructed well. Visit us at fit	ιτρ.//www.Ku	HCV9.KOA/	water well/ll	IUCA.IIUIII.				

Check: \square White Copy, \square Blue Copy, \square Pink Copy