		RECORD		Div	ision of V	Water Reso	ources App. N	No.				
	TION OF	WATER WELL: Seward	Fraction NE ¼ NW ¼ NE ¼				Township T 35					
County: Seward NE ¼ NW ¼ NE ¼ NE ¼ 5 T 35 S R 33 □ E ⊠W Street/Rural Address of Well Location; if unknown, distance & direction Global Positioning System (GPS) information:												
from neares	st town or int	ersection: If at owner'							degrees)			
						Latitude: (in decimal degrees) Longitude: (in decimal degrees)						
124 West 2 nd , Liberal, Kansas						Elevation:						
2 WATER WELL OWNER: KDHE T & M						Datum: □ WGS 84, □ NAD 83, □ NAD 27						
RR#, St. Address, Box # : 1000 SW Jackson					Collection Method:							
City, State, ZIP Code : Topeka, Kansas						GPS unit (Make/Model:						
					☐ Digita	l Map/Phot	o, 🗖 Topograj	phic Map, [☐ Land Sur	vey		
				<u>_</u>	est. Accura	acy: □ <3	m, 🛘 3-5 m, 🕻	□ 5-15 m,	□ >15 m			
3 LOCATE WELL												
WITH	AN "X" II	N 4 DEPTH OF	COMPLETED WELL		180 ft.							
SECT	ION BOX:	Depth(s) Ground		ft. (2) ft. (3) ft.								
	N	WELL'S STATE	C WATER LEVEL N	NA ft.	ft. below land surface measured on mo/day/yr							
	x	Pum	p test data: Well water									
	NE -	EST YIELD	gpm: Well water	wac	f	t after	ho	ure numni	nα	onm		
			TO DE LICED AC. D.	vhlia water		Cootho	no	Tricot		gp.iii		
w -						ater supply Geothermal Injection well						
!	Domestic Deedlot Doil field water sur						pply □ Dewatering □ Other (Specify below) garden □ Monitoring well MW-6					
Fsw	SE -	☐ Irrigation ☐	Industrial Domestic-	lawn & gard	ien i	Monito	oring well		MW-6			
Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☒ No												
l	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 JOINTS: Glued Clamped Welded Threaded 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												
ITYPE 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 ☐ SCREEN-PERFORATED INTERVALS: From 150 ft. to 180 ft., From ft. to ft.												
□ Louvered shutter □ Key punched □ Wire wrapped □ Saw cut □ Other (specify)												
SCREEN-PERFORATED INTERVALS: From 150 ft. to 180 ft., From ft. to ft.												
From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 148 ft. to 180 ft., From ft. to ft.												
J GK	GRAVEL PACK INTERVALS: From 148 ft. to 180 ft., From ft. to ft.											
From ft. to ft., From ft. to ft.												
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.												
W/hat is the	vais Fr	ce of possible contami	2 II. From	<u>Z</u> II. I	0i	40 II.	From		. 11. 10	It.		
	tic tank	Lateral lin		Livestock	none	□ Insect	icide storage	ПО	ther (specif	fy below)		
	ver lines	☐ Cesspool	Sewage lagoon				loned water v		ilici (specii	y ociow)		
☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertiliz							ell/gas well		taminate	d site		
Direction from well Distance from well												
FROM	TO	LITUO	LOGIC LOG	FROM	ТО		. LOG (cont.	or DLUC	CINC INT	TEDVALS		
0		Cement	LOGIC LOG	107	143		/caliche str		OINO IN I	EKVALS		
6"		Clay w/sandy clay	etrke	143	167		caliche w/		lenses			
13		Clay & caliche w/s		167	181		caliche w/					
23	33	Sandy clay w/clay		107	101	- City C	cancie w	IIIIC Suiic	- Strike			
33	50	Clay & caliche w/s										
50			clay w/clay & caliche									
		Strks										
65	80	Clay w/sandy clay	lenses					-				
80	98	Clay w/sandy clay	strks									
98	107	Clay & caliche w/s	andy clay strks									
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) 6/4/10 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 or 783 This Water Well Record was completed on (mo/day/year) 6/15/10												
									6/15/	10		
1		of Woofter Pump					woojk			· · · · · · · · · · · · · · · · · · ·		
INSTRUCT	IONS: Please	fill in blanks and check the	correct answers. Send three co	pies (white, b	lue, pink)	Kansas I	Department of	Health and	Environmen	it, Bureau of		
INSTRUCTIONS: Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) of Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one 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.												

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