			ge in Well Use		Division o		49455	Well ID	East #1		
					Section N	App. No.			go Number		
1 LOCATION OF WATER WELL: County: Decatur			1/4 NW 1/4 NE 1/4	Section r			ownship Number Range Nu T 3 S R 26 □ E				
				Street or Rural Address where well is located (if unknown, distance and							
2 WELL		Last Name: Bailey Boys	First:	direction from nearest town or intersection): If at owner's address, check here:							
Address:				direction from nearest town or into			ersection): If at owner's address, check here:				
Address	FO BOX			Int. of 2800 & Hwy 361/2 Mile South & 858' ₩εఫ₽							
City: Norcatur State: KS ZIP: 67653											
3 LOCAT				260		T 1	30 910607				
	WITH "X" IN SECTION POY. Depth(s) Groundwater Encountered: 1)										
				3) ft., or 4) ☐ Dry Well			Longitude: 100.220278 (decimal degrees)				
N WELL'S STATIC WA			TED I EVEL: 15	_Dry wei	¹	Horizontal Datum: WGS 84 NAD 83 NAD 27					
			, measured on (mo-day-yr)2-24-17			Source for Latitude/Longitude: GPS (unit make/model:Garmin Montana 650T.)					
						(WAAS enabled? ■ Yes □ No)					
NWNE ☐ above land surface, Pump test data: Well w						Land Survey ☐ Topographic Map					
			s pumping			■ Online Mapper: Google Earth					
	1/2		ater was ft.			- California (California California Californ					
SW	SE		oumpinggpm								
Estimated Yield: .100			tgpm			6 Elevation:ft. ☐ Ground Level ☐ TOC					
S Bore Hole Diameter:			15 in. to 260		Source: Land Survey GPS Topographic Map						
	mile		in. to								
7 WELL WATER TO BE USED AS:											
1. Domestic			ater Supply: well ID). 🗌 Oil Fie	eld Water Supply: leas	se			
. –	Household 6. Dewatering: how many wells?										
_				harge: well ID			☐ Cased ☐ Uncased ☐ Geotechnical				
Livesto			ng: well ID								
	2. Irrigation 9. Environmental Remediation: well ID										
3. Feedlot Air Sparge Soil Vapor Ex					ion b) Open Loop Surface Discharge Inj. of Water 13. Other (specify):						
4. 🗌 Industi		Recovery									
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:											
Water well disinfected? ■ Yes □ No											
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other CASING JOINTS: ■ Glued ☐ Clamped ☐ Welded ☐ Threaded											
Casing diameter											
Casing diameter											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)											
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)											
SCREEN OR PERFORATION OPENINGS ARE:											
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)											
□ Louvered Shutter □ Key Punched □ Wire Wrapped ■ Saw Cut □ None (Open Hole)											
SCREEN-PERFORATED INTERVALS: From 180 ft. to 260 ft. From ft. to ft., From ft. to ft.											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
Nearest source of possible contamination: □ Septic Tank □ Lateral Lines □ Pit Privy □ Livestock Pens □ Insecticide Storage											
		☐ Cess Pool									
□ Sewer Lines □ Cess Pool □ Sewage Lagoon □ Fuel Storage □ Abandoned Water Well □ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well											
Other (Specify)											
Direction from well?											
10 FROM	ТО	LITHOLO		FROM			HO. LOG (cont.) or P	LUGGING	GINTERVALS		
0	2	Surface		172	217		to some med san				
2	15	Loess		217	235		dstone w/ limestor				
15	80	clay w/ caliche strks	711-W Will 1	235	242		/ w/ fine sand	u iiiie	Juliu Suks		
80	113	sandstone w/ clay & c	calicha etrke	242	248		to some small gra	nvol			
113	127	clay & caliche w/ sand		248	251	flint		1401			
127	135	sandstone	JOINE SUVS	251	260						
			d w/ alay lana	Notes:		yell	ow ochre				
135		fine to some med san	u w/ clay lens	- Notes:							
147 161 sandstone & clay											
161 172 fine to some med sand w/ clay strks											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, or plugged under my invisition and was completed on (mo day year) 2-23-17											
under my jurisdiction and was completed on (mo-day-year) .2-23-1.7											
under the business name of RMD Drilling & Well Service, LLC. Signature											
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section,											
1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.											
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015											