		RECORD Form		Division of Water							
			e in Well Use		sources App. 1			Well ID	27 1		
1 LOCATION OF WATER WELL: Fraction County: CLOUD Fraction NE 1/4 NE 1/4 NE 1/4				i i	ection Numb 4	er lov	Township Number Range Number R 4 □ E ■ W				
2 WELL OWNER: Last Name: Blochlinger First: MICHAEL Street or Rural Address where well is located (if unknown, distance and											
Business: Address: 1149 N 90TH ROAD direction from nearest town or intersection): If at owner's address, check here:											
Address. City: CONCORDIA State: KS ZIP: 66901											
3 LOCAT			206	ft 5 Latit	nda.	39 473517		(l			
WITH "X" IN SECTION BOY. Depth(s) Groundwater Encountered: 1)											
SECTION BOX: Depth(s) Groundwater Encountered. 1)							ım: 🗆 WGS 84 i				
		WELL'S STATIC WA	TER LEVEL:	? ft.	Source		ude/Longitude:	- NAD	,5 L NAD27		
		below land surface	, measured on (mo-day-	yr) 03/05/20	is	GPS (unit r	nake/model:GA	RMIN			
NW	NE	☐ above land surface	, measured on (mo-day-	yr)			S enabled? 🗌 Y		0)		
	1 1 1	Pump test data: Well v	Pump test data: Well water was26 ft. after 20 gpt				ey 🔲 Topograph				
W	• E	after4 hours	s pumping == fi vater was fi	gpm		Online Ma _l	pper:				
SW	SE		after hours pumping gpi			4400					
		Fstimated Vield: 20	gnm		6 Elevation:ft. Ground Level TOC				Level 🗌 TOC		
	S	Bore Hole Diameter:	Bore Hole Diameter: 10 in. to 206			t. and Source: Land Survey GPS Topographie M					
<u> </u>	mile		in. to			☐ Othe	er				
7 WELL WATER TO BE USED AS:											
l .	1. Domestic: 5. Public Water Supply: well ID										
	Household 6. Dewatering: how many wells?										
_	□ Lawn & Garden 7. □ Aquifer Recharge: well ID □ Livestock 8. □ Monitoring: well ID										
. —											
	2. ☐ Irrigation 9. Environmental Remediation: well ID 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex										
4. ☐ Industrial ☐ Recovery ☐ Inject				13. Other (specify):							
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:											
Water well disinfected? Yes No No											
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other											
Casino dian	neter 5	in to 86 fi	Diameter	in to	ft Diar	neter	in to	_ weided	i 🔲 tiireaded		
Casing diameter 5 in to 86 ft. Diameter in to ft. Diameter in to ft. Diameter in to ft. Casing height above land surface 12 in Weight 2.893 lbs/ft. Wall thickness or gauge No265											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)											
☐ Brass ☐ Galvanized Steel ☐ Concrete (ile ☐ None used (open hole)											
SCREEN OR PERFORATION OPENINGS ARE:											
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)											
		☐ Key Punched ☐ W			None (Open I						
SCREEN-PERFORATED INTERVALS: From86											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: ☐ Neat eciment ☐ Cement grout ■ Bentonite ☐ Other											
		ole contamination:	It., From	it. to	ft., From	•••••	ft. 10	ft.			
Septic	-	Die contamination: ☐ Lateral Line	es 🔲 Pit Privy	Г	Livestock Pe	ane.	☐ Insecticide	Storage			
Sewer		Cess Pool	☐ Sewage La ₁		Fuel Storage		☐ Abandone		Well		
_	tight Sewer L				Fertilizer St		☐ Oil Well/C				
Other (Specify)											
10 FROM	TO	LITHOLOG	GIC LOG	FROM	TO		LOG (cont.) or PI	UGGIN	G INTERVALS		
0	5	TOP SOIL		84			GRAY CLAY				
5	16	GRAY CLAY		111	152		N & GRAY CLA				
16	17	LIMESTONE		152	203		BROWN AND	<u>GRAY</u>	CLAY		
17	20	YELLOW AND GRAY	CLAY	203	240	FIRE CL	_AY				
20	29	GRAY CLAY									
29	36	PYRITE LAYER		N T :	<u> </u>						
36						Notes: WELL CASED AT 206 FT.					
44 52 LIGHT GRAY CLAY											
52 84 DARK GRAY CLAY											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, or plugged under my jurisdiction and was completed on (mo_day-year) .02/27/2018 and this record is true to the best of my knowledge and belief.											
Kansas Water Well Contractor's License No. 480 This Water Well Record was completed by (mo-day-rear) 22/14/2018											
under the business name of Williams Drilling Co., Inc. 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 the www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015											