WATER WELL R		WWC-5		rision of Water		MW-1	
Original Record		ge in Well Use		ources App. No.		Well ID	
1 LOCATION OF W	ATER WELL:	Fraction		tion Number	Township Numb		
County: Graham	SE14 SE14 SE14		12	T 8 S	R 23 □ E ■ W		
2 WELL OWNER: L	ast Name:	First:	Street or Ru	ral Address wh	ere well is located	(if unknown, distance and	
Business: KDHE direction from nearest town or intersection): If at owner's address, check here:							
Address: 1000 SW Jackson St. Suite 410							
Approximately 350 ft. west of NW corner of intersection of Main							
City: Topeka	State: KS	ZIP: 66612	St. and 280th Ave on north side of main Hill ("i+/				
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL: 48 ft. 5 Latitude: 39.364916 (decim							
WITH "X" IN							
SECTION BOX:				Longitude: -99.828436 (decimal degrees) Horizontal Datum: ■ WGS 84 □ NAD 83 □ NAD 27			
WELL'S STATIC WATER LEVEL:N.A				Horizont	al Datum: WGS 8	4 LI NAD 83 LI NAD 27	
below land surface, measured on (mo-day-yr)				Source for Latitude/Longitude:			
' '				GPS (unit make/model:)			
NW NE	, measured on (mo-day-		1	(WAAS enabled? ☐ Yes ☐ No)			
	vater was f		Land	Land Survey Topographic Map			
W	s pumping						
SW SE		vater was f		ļ			
		s pumping	6 Elevation: Alexandrian ft. Ground Level TO			■ Ground Level □ TOC	
S S	Estimated Yield:	8.75 in to 48					
S mile	9(.y in. to	π. and	1 ——	•	Orb D ropograpine map		
7 WELL WATER TO							
1. Domestic:		iter Supply: well ID				ease	
Household	6. Dewatering: how many wells?			11. Test Hole: well ID			
Lawn & Garden	_ 1				☐ Cased ☐ Uncased ☐ Geotechnical		
Livestock	8. Monitorin	<u>v- i</u>		12. Geothermal: how many bores?			
2. Irrigation	9. Environmental Remediation: well ID				a) Closed Loop Horizontal Vertical		
3. Feedlot		e 🔲 Soil Vapor I	Extraction			ischarge 🔲 Inj. of Water	
4. ☐ Industrial	☐ Recovery	☐ Injection		13. 🔲 Othe	r (specify):		
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:							
Water well disinfected?),	F		
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter ft., Diameter ft., Diameter ft., Diameter ft.							
Casing height above land surface in. Weight lbs/ft. Wall thickness or gauge No. Sch 40							
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 .28 ft. to .48 ft., From ft. to ft., From ft. to ft.							
GRAVEL PACK INTERVALS: From 26 ft. to 48 ft., From ft. to ft., From ft. to ft.							
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							
☐ 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) Royal Acid.							
Direction from well? Distance from well? ft.							
10 FROM TO	LITHOLO	GICLOG	FROM			PLUGGING INTERVALS	
	Sandy Clay, brown, fir			10 11		. 2000mo milky ALS	
	Sandy Clay, brown, fir					X	
		m, coarse sand	4		· · · · · · · · · · · · · · · · · · ·		
	lamp		 				
1	Sandy Clay, brown, fir	m, coarse sand	<u> </u>			***************************************	
v	vet						
			Notes:	<u> </u>	······································		
11 CONTRACTORS	ODIANDOWNED	CEDTIFICATION	This	- well	ongtmucted [7]	anatmated on Delegant	
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) 1.6-2020 and this record is true to the best of my knowledge and belief.							
Kansas Water Well Contractor's License No. 604 This Water Well Record was completed on (mo-day-year)							
under the business name of Environmental Priority Service. Inc. 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,							
Mail 1 white conv alo	ng with a fee of \$5 00 for each	ch constructed well to Van	sas Denartment	of Health and En	vironment Rureau of W	ater 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			KSA 82a-12		your roomus. Telepi	Revised 7/10/2015	
	TIMES TO THE BUILDING THE STATE OF THE						