			Form W			ision of Water	1					
				in Well Use		ources App. No.		Well ID				
1 LOCATION OF WATER WELL: Fraction						Section Number Township Number Range Number						
County: Leavenworth						35	T 10 S		■E □ W			
2 WELL OWNER: Last Name: Miller First: Albert Street or Rural Address where well is located (if unknown, distance									distance and			
Business:					direction from	rection from nearest town or intersection): If at owner's address, check here:						
Address: 20268 199th St Address:												
City:	Tongano	via Si	tate: KS	ZIP: 66068								
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:							20 1207	7				
WITH "		4 DEPTH (OF COMP	LETED WELL:	ι α γ π	140 ft. 5 Latitude: 39.13977 (decimal degrees) Longitude: -95.04048 (decimal degrees)						
SECTIO	SECTION BOX: Depth(s) Groundwater Encountered: 1)					y Well Horizontal Datum: ■ WGS 84 □ NAD 83 □ NAD 27						
N	WELL'S STATIC WATER LEVEL:52						or Latitude/Longitude:		35 LI NAD 27			
	below land surface, measured on (mo-day-					2 GPS	(unit make/model:					
NW.	above land surface, measured on (mo-da				-ут)	(WAAS enabled? ☐ Yes ☐ No)						
1 1	Pump test data: Well water was				ft.	☐ Land Survey ■ Topographic Map						
w	E after hours pumping					Online Mapper:						
sw	SW SE Well water was											
Estimated Yield:					gpm	6 Elevation: 880 ft. ☐ Ground Level ☐ TOC						
	S	Bore Hole Di	Bore Hole Diameter: 8.5 in. to 140			and Source: Land Survey GPS Topographic Map						
1 n	1 milein. to					. ft.						
7 WELL WATER TO BE USED AS:												
1. Domestic:			Public Wate	10. Oil Field Water Supply: lease								
_	Household 6. Dewatering: how many wells?											
	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID						d Uncased C					
. =	Livestock 8. Monitoring: well ID						mal: how many bores					
	2. ☐ Irrigation 9. Environmental Remediation: well ID 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex											
4. Industrial Recovery Injection					LAHACHOH	13. Other (specify):						
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded												
Casing diameter 5 in to 140 ft., Diameter in to ft., Diameter in to ft., Diameter in to SCH 40 ft. Casing height above land surface 18 in Weight 18 Weight Wall thickness or gauge No. SCH 40 ft.												
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: From110												
GRAVEL PACK INTERVALS: From												
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other												
Very set source of partible contemporalism.												
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												
Direction from well? .n/a												
									C ***			
10 FROM	ТО		THOLOGI	C LOG	FROM	TO L	ITHO. LOG (cont.) or	PLUGGIN	JINIERVALS			
	2	Topsoil										
	8	Clay										
8		Sandy Clay										
28		Sandstone					······································					
42	95	Sandy Shale										
95	101	Shale Charles			Notes:							
101	109	0										
109 132 Sandstone												
132 140 Sandy Limestone 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged									or Divoged			
under my jurisdiction and was completed on (mo-day-year) .05/10/2022 and this record is true to the best of my knowledge and belief.												
Vonces We	+~= W/~11 C~	ntrootor's I issu	See No. 59	This W	oter Well Rec	tuto pew han	sieted on (mo-day-vi	ear)	16U66			
under the h	neinees non	of Jesse Yo	akum Wa	ell Drilling	Si	onature	$\mathcal{N} - \mathcal{O} \mathcal{X} \mathcal{O}$	$\omega \sim 10^{\circ}$	***************************************			
Mail	l white copy a	long with a fee of 3.	5.00 for each	constructed well to: Ka	ınsas Departmen	t of Health and ea	MICHELLY DUICER, A	au, Owibi	300110115			
1000	SW Jackson	St., Suite 420, Tope	ka, Kansas 60	6612-1367. Mail one to	Water Well Ow	ner and retain one	for your records. Teleph	one 785-296	-5524.			
Visit us at htts	n·//www.kdhek	s gov/waterwell/in	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									