WATER WELL			W W C-5		Division of Wa			W 11 TD			
Original Record			e in Well Use		esources App.		1 . N I	Well ID			
1 LOCATION OF County:	4 41 -				Section Number Tow			wnship Number Range Number R AS X E W			
2 WELL OWNER		anne			Rural Address						
Business: Ka	ns aco n uk	izati	Terrall		m nearest town	or intersection):	If at owner	's address,	check here: 🔲		
Address 51	lansas A	WE >	leawood	45	Repl	allyes	to foc	KW2	,		
City: (Kansalcate State: KS) ZIP: 66024											
3 LOCATE WELL				201		20	20 1	ر ا			
WITH "X" IN	4 DEPTE		IPLETED WELL:	ft. 5 Lati							
SECTION BOX:		Depth(s) Groundwater Encountered: 1) ft				Longitude 74 37 00.5 (decimal degrees)					
N		2) ft. 3) ft., or 4) \(\subseteq \text{Dry Well} \) WELL'S STATIC WATER LEVEL: ft.					Datum: WGS 84 NAD 83 NAD 27				
X		The state of the s									
NW NE		above land surface, measured on (mo-day-yr)									
NWNE		Pump test data: Well water was ft.				Land Survey Topographic Map					
w		after hours pumping gpm					Online Mapper:				
		Well water was ft.									
SW SE			s pumping		6 Flor	4					
	Estimated `	Estimated Yield: /gpm Bore Hole Diameter:/gm in. to35 ft. and				6 Elevation:					
S					nd Source: Land Survey GPS Topographic Ma						
Think to											
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID											
☐ Household					11. Test Hole: well ID						
☐ Lawn & Garden		Dewatering: how many wells? Aquifer Recharge: well ID				Cased Uncased Geotechnical					
Livestock											
2. Irrigation		9. Environmental Remediation: well ID					. Geothermal: how many bores?				
3. Feedlot		☐ Air Sparge ☐ Soil Vapor Extraction b) Open Loop						scharge 🔲	Inj. of Water		
4. Industrial		☐ Recovery	☐ Injection		13. 🔲 🤆	Other (specify)	:				
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 XPVC Other CASING JOINTS: Glued Clamped Welded Threaded											
Casing diameter											
Casing height above land surface											
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 M Other (Specify)											
Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)											
SCREEN-PERFORATED INTERVALS: From											
UKAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Consults. Grout Intervals: From . 1.8											
Nearest source of po	sible contaminat	tion•	It., Prom	. 11. 10 .	11., 11011	1	11. 10	16.			
Septic Tank		Lateral Line	es 🔲 Pit Privy		Livestock P	ens .	☐ Insectic	ide Storage			
☐ Sewer Lines		Cess Pool	☐ Sewage La	agoon	☐ Fuel Storag	e		ned Water			
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well											
Direction from well?											
Direction from well?		* *******	Distance from w	veil?O.		TITUO IO		DILLOCRI	C DITEDVALO		
10 FROM TO	Acab 1	LITHOLOG	GIC LOG	FROM	TO	LITHO, LO	G (cont.) or	PLUGGIN	G INTERVALS		
0 10	73774	24 411	11/11/11/11								
分外一次是	- NOULK	· chair	inguit.	1 4							
74 5 1750	DK WA	4 70 B	east sittle	mit,							
11.0 13.0	waye	layto	sur eur	<i>1</i>	+	-					
00 00	ENAIL S	udth	ULL TO SIN	-							
	-			Notes:		I					
		110605									
11 CONTRACTO	R'S OR LAND	OWNER'S	S CERTIFICATION	N: This w	ter well was	construct	ed, reco	nstructed	or Dlugged		
under my jurisdiction	n and was comp	oleted on (n	no-day-year) 8/32	2/16. a	nd this record	is true to the	best of my	knowled	ge and belief.		
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) This water well record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 133 This water Well Record was completed on (mo-day-year)											
under the business r	ame of	CAUL	onmental	·····				<u> </u>			
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas											
Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 9/10/2012											
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