WATER Y	WELL R		Division of Water									
☐ Original	Record \square	Correction		e in Well Use			rces App. No		11. 37. 1	Well ID		
1 LOCATION OF WATER WELL: Fraction						Section Number Township Number 5 T 13 S					nge Number 4 ■ E □ W	
	DICKINSO			or Rural Address where well is located (if unknown, distance and								
2 WELL C Business:	WNER: L	direc	lirection from nearest town or intersection): If at owner's address, check here:									
Address: 2452 RAIN ROAD												
Address:			- 1/0	07404								
	CHAPMAI	T	State: KS	ZIP: 67431			1		00 == 00	20.11		
3 LOCATE WITH "X				IPLETED WELL:		50						
SECTION		Depth(s) G	roundwater	Encountered: 1)		ft. Longitude: 97-00-58.70 W (decimal decimal					.(decimal degrees)	
	2) ft. 3) ft., or 4) WELL'S STATIC WATER LEVEL:						Dry Well Horizontal Datum: WGS 84 NAD 83 NAD 8 Source for Latitude/Longitude:					
	below land surface, measured on (mo-da						9/7/2023 GPS (unit make/model: GPS MINI					
NW	NF	☐ above	land surface	, measured on (mo-da	y-yr)) (WAAS enabled? ☐ Yes ☐ No						
	Pump test data: Well water was						☐ Land Survey ☐ Topographic Map					
w 7	E	after	s pumping	1	Online Mapper:							
SW	SE	Well water was ft. after hours pumping gpm										
	Estimated Viold: 20 gram					6 Elevation:					d Level LTOC	
	S Bore Hole Diameter:					n. and						
1 mile in, to ft.												
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID												
I .	1. Domestic: 5. ☐ Public Water Supply: well ID Household 6. ☐ Dewatering: how many wells?											
	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID					Cased Uncased						
	☐ Livestock 8. ☐ Monitoring: well ID											
	2. ☐ Irrigation 9. Environmental Remediation: well ID						a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. Industr												
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:												
Water well disinfected? Ves \(\Pi \) No												
P. TWDE OF CASING USED: Great PVC Gother CASING JOINTS: Glued G Clamped G Welded G Threaded												
Casing diameter 5 in to 26 ft., Diameter 46 in to 50 ft., Diameter in to ft. Casing height above land surface 18 in Weight 2.8 lbs./ft. Wall thickness or gauge No. 265												
Casing height above land surface 18 in. Weight 2.8 lbs./ft. Wall thickness or gauge No. 200												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)												
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 .26												
SCREEN-F	PERFORAT	ED INTERV	ALS: Fro	m .49 It. to .79.		ft., From	n. 10	0	ft From		to ff	
GRAVEL PACK INTERVALS: From 25 ft. to 50 ft., From ft. to ft., From ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From 4 ft. to 25 ft., From ft. to ft., From ft. to ft.												
Nearest source of possible contamination:												
☐ Septic	Tank] Lateral Lir				Livestock Po			ticide Stora doned Wate		
Sewer			Cess Pool	☐ Sewage it ☐ Feedyan			Fuel Storage			Vell/Gas We		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify) ☐ Distance from well? 80												
Direction from	om well?	\ST		Distance from	n well?	80				ft.		
10 FROM	TO		LITHOLO	OGIC LOG		FROM	TO	LITHO.	LOG (cont.)	or PLUGGI	ING INTERVALS	
0		LIMESTON		RS								
8	19	YELLOW S										
19		LIMESTON GRAY SHA									区 号 前	
38	50	GRAT SHA	\LL		-+						TH 5 5	
											S 00	
	Notes:							111 00 11				
	2 %											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged and this record is true to the best of my knowledge and belief												
under my jurisdiction and was completed on (mo-day-year) 9/7/2023 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 518												
l undon tha k	MIGINAGE NAT	ne of BLUE	VALLEY	DICH I HAG HAG.			gnamre					
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.												
		St., Suite 420, T ks.gov/waterwe			e to Wa	iter Well Ow SA 82a-12	ner and retain	one for you	ui records. Tele	Priorie 783-2	ed 7/10/2015	
Visit us at htt	p://www.kdhe	ks.gov/waterwe	m/maex.ntml		17	DI 1 020-12	1.4					