Ŵ			RECORD	Form W			Div	ision of Water				
C					in Well Use			urces App. No		Well ID	L	
1		LOCATION OF WATER WELL: Fraction				Section Number Township Number Range Number						
	County: MIAMI NW ¼ SE ¼ SW ¼ N											
2								treet or Rural Address where well is located (if unknown, distance and rection from nearest town or intersection): If at owner's address, check here:				
	Address: 29185 274TH TERRACE						irection from i	rection from nearest town of intersection). If at owner's address, check here.				
	Address:											
	City:	PAOLA	L	State: KS	ZIP: 66071							
3		LOCATE WELL 4 DEPTH OF COMPLETED WELL:					. <b>334</b> ft	.334 ft. 5 Latitude:				
	WITH "X" IN SECTION BOX: Depth(s) Groundwater Encountered: 1)0.							ft. Longitude:				
		N 2) ft. 3) ft., or 4)						Horizor	ntal Datum: WGS 8	4 🗆 NAD	83 🗆 NAD 27	
	·····	WELL'S STATIC WATER LEVEL:							for Latitude/Longitude			
				below land surface, measured on (mo-day-yr)					S (unit make/model:			
	NW	NE		D above land surface, measured on (mo-day-yr) Pump test data: Well water was ft.					(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map			
w E				after hours pumping					line Mapper: GOGG			
				Well water was ft.								
SWSE				after hours pumping gp								
			Estimated Y	Estimated Yield:0gpm				6 Elevation:ft.  Ground Level  TOC Source: Land Survey  GPS  Topographic Map				
S			Bore Hole I	Bore Hole Diameter: .5.5/8. in. to				Other				
	7 WELL WATER TO BE USED AS:   1. Domestic: 5.    Public Water Supply: well ID   10.    Oil Field Water Supply: lease											
	Househol											
	Lawn & Garden 7. Aquifer Recharge: well											
	Livestock	c a			: well ID				ermal: how many bore			
	Irrigation											
					🗆 Soil		traction		b) Open Loop Surface Discharge Inj. of Water			
	4. Industrial 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 PVC Other HD POLY CASING JOINTS: Glued Clamped Welded Threaded												
Casing diameter <u>selow</u>												
TYPE OF SCREEN OR PERFORATION MATERIAL: NONE												
□ Steel □ Stainless Steel □ Fiberglass □ PVC □ Other (Specify)												
Brass Galvanized Steel Concrete tile None used (open hole)												
SUREEN OK PERFORATION OPENINGS ARE:												
		ous Slot	☐ Mill Slot		uze Wrapped		ch Cut □ [	Drilled Holes	Other (Specify)			
5			r 🗌 Key Punc						ft., From	ft tr	A	
10												
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft. to ft.												
Grout Intervals: From												
N	earest sourc	e of pos	sible contaminat	ion:								
	Septic Ta			Lateral Lines				Livestock Per		icide Storage		
				Cess Pool		vage Lag		Fuel Storage Fertilizer Stor		ioned Water ell/Gas Well		
	U Watertigh			Seepage Pit		•		rennizer Stor				
Direction from well? ft.												
	FROM	TO		LITHOLOG			FROM		LITHO. LOG (cont.) a		IG INTERVALS	
0	3		SOIL/CLAY									
3		2	LIME	268-276	SHALE		334		3-334' BORES PLU		ITH	
22	2 1	26	SHALE	276-295				ŀ	HIGH SOLID BENT	ONITE		
12		44	LIME	295-300								
14		73	SHALE	300-316								
17		78	LIME	316-334	4 SHALE		NT :					
17						Notes:						
2	230 241 SHALE							e well was	constructed [] rec	onstructed	or plugged	
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) .09/02/20.16 and this record is true to the best of my knowledge and belief.												
K	ansas Wate	r Well	Contractor's Lic	ense No. 🤉	61 1	This Wa	ter Well Re	cord was con	npleted on (mo-day)	rear)_09/0	6/20.16	
u	nder the bus	siness n	ame of EVAN	SENERG)	( DEVELOP	MENI.	.INCS	ignature.	Il Caller		?	
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.												
v			on St., Suite 420, To heks.gov/waterwell/	-	00012-1307. Ma		KSA 82a-12		ie for your records. Telep		-5524. d 7/10/2015	