WATER WELL R		Form WW		Divis	sion of Water				
Original Record		☐ Change in W			irces App. No.	1	Well ID		
1 LOCATION OF WATER WELL: Fraction				Section Number Township Number Range Number					
County: Har	vey		45h/45e 1/4			T 2 3 S	R /		
County: Hay 2 WELL OWNER: La Business: W. L.	ist Name: Jo	nes First				ere well is located			
Business: 7636 Pagent direction from nearest town or intersection): If at owner's address, check here: Address:									
Address:									
City: Wichita State: 18 ZIP: 6/206 Will hive here									
3 LOCATE WELL	1	OF COMPLE	TED WELL: .	50 ft	5 Latitude	9:		(decimal decrees)	
WITH "X" IN			ntered: 1) 3. 5					-	
SECTION BOX:			ft., or, 4)		Longitude:				
11	WELL'S ST	ATIC WATER I	EVEL: 3./	ft.	Source for Latitude/Longitude:				
	below la	and surface, meas	ured on (mo-day-	yr)	GPS (unit make/model:)				
NW NE	above la	and surface, meas	ured on (mo-day- ured on (mo-day-	yr)7131.	(WAAS enabled? ☐ Yes ☐ No)				
W	I ump test de	ita. Well water v	zas ft ping	•	☐ Land Survey ☐ Topographic Map ☐ Online Mapper:				
			vas fi			не маррет			
SW SE	after	hours pum	oing	gpm	C 1731 41	^		IX 1 D TOC	
	Estimated Y	ield: 15-21.gp	m 5%		6 Elevation:ft. Ground Level TOC				
S	Bore Hole D	Diameter: dr. 2	in. to	ft. and	Source: Land Survey GPS Topographic Map Other				
in to in the total the tot									
7 WELL WATER TO BE USED AS: 1. Doprestic: 5. □ Public Water Supply: well ID									
Household			w many wells?			le: well ID			
Lawn & Garden			ge: well ID						
Livestock			ÍI ID			mal: how many bores			
2. Irrigation	9. Er	vironmental Ren	nediation: well ID) ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	a) Close	ed Loop 🔲 Horizon	al 🗌 Vert	ical	
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extract				b) Open Loop				
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? Ves No									
8 TYPE OF CASING USED: Steel PVC Other									
Casing diameter									
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									
GRAVEL PACK INTERVALS: From 2.0. ft. to 50. 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:									
Deptic Tank	Technical Control of the Control of	Lateral Lines	☐ Pit Privy		Livestock Pens		cide Storage		
☐ Sewer Lines ☐ Watertight Sewer Lines		Cess Pool Seepage Pit	☐ Sewage Lag ☐ Feedyard		Fuel Storage Fertilizer Stora		oned Water ell/Gas Well		
Other (Specify)	ies 🗀 s	seepage Fit		1 []	rerunzer Stora	ge 🗀 On we			
Other (Specify), Direction from well?	V		Distance from we	ell?/5.D.	 	,,.,,,, ft			
10 FROM TO		ITHOLOGIC I		FROM		THO. LOG (cont.) o		G INTERVALS	
0 15	Clay								
15 18	Find 9	and							
14 35 0	2104					AND		<u></u>	
	, , ,	· · · · · · · · · · · · · · · · · · ·	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
35 45	med S	and k	Waste	<u>Y</u>			- Annia		
45 50	Shale			NT 4			200	· · · · · · · · · · · · · · · · · · ·	
	Notes:								
	And								
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) 4:-13 and this record is true to the best of my knowledge and belief.									
under my jurisdiction and was completed on (mo-day-year)									
Lunder the business name			vani Avanderina	2 Z 2 19 W			, -	Contract of the Contract of th	
arraor the pasmess flam.	e of 1.74	CKHUS	1784/	j. 74			و و و و و و و و و و و و و		

KSA 82a-1212

Revised 9/10/2012

Visit us at http://www.kdheks.gov/waterwell/index.html