	WELL F			Division				
	al Record		······································		irces App. No		Vell ID	
1 LOCATION OF WATER WELL: Fraction				1	ction Number Township Number Range Number			
County: Sedgwick NW 4 SW 4 SW 4 SE 4 15 T 26 S R 2 E W WELL OWNER: Last Name: FLOYD First: Tarrance Street or Rural Address where well is located (if unknown, distance and								
2 WELL Business:		Last Name: FLOYD First: Tarrano					unknown, distance and	
1	Business: Address: 12000 E. 53rd St. N. direction from nearest town or intersection): If at owner's address, check here:							
Address:								
	Wichita	State; Kansas ZIP: 67226						
3 LOCAT		4 DEPTH OF COMPLETED WEI	1. 120	ft	5 Latitud	o: 37.78236	(decimal degrees)	
	WITH "X" IN SECTION BOX: Depth(s) Groundwater Encountered: 1)					5 Latitude: 37.78236 (decimal degrees) Longitude: -97.19821 (decimal degrees)		
	2) ft., or 4) Dry Well					Horizontal Datum: ■ WGS 84 □ NAD 83 □ NAD 27		
1	WELL'S STATIC WATER LEVEL: 45					Source for Latitude/Longitude:		
			below land surface, measured on (mo-day-yr)10/05/23.			S (unit make/model:	I-Phone	
NW	NE	above land surface, measured on (mo-day-yr)				(WAAS enabled? \(\subseteq \text{ Yes} \subseteq \text{No} \)		
	-	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map		
W	E	after hours pumping gpm Well water was ft.			│ □ On	☐ Online Mapper:		
SW	SE		afterhours pumpinggpm					
	×	Estimated Yield:gpm	Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC		
	S	Bore Hole Diameter: 12 in. to 120 ft. and			Source: Land Survey GPS Topographic Map			
1	mile	in. to		Other	·······			
7 WELL WATER TO BE USED AS:								
1. Domestic:						10. Oil Field Water Supply: lease		
1	Household 6. Dewatering: how many wells?				11. Test Hole: well ID			
	Lawn & Garden 7. Aquifer Recharge: well ID				Cased Uncased Geotechnical			
2. Irrigat	Livestock 8. Monitoring: well ID.					12. Geothermal: how many bores?		
3. ☐ Feedle	☐ Irrigation 9. Environmental Remediation: well ID					b) Open Loop		
4. Indust						13. Other (specify):		
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes No If yes, date sample was submitted:								
E .			103	INO	11 yes, date	sample was submitted.	***************************************	
Water well disinfected? ■ Yes □ No 8 TYPE OF CASING USED: □ Steel ■ PVC □ Other								
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 ☐ Other (Specify)								
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)								
SCREEN-PERFORATED INTERVALS: From 40								
GRAVEL PACK INTERVALS: From 24 ft. to 120 ft., From ft. to ft. from ft. to ft.								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From4								
Septic Tank								
☐ Sewer Lines ☐ Cess Pool ☑ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well								
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well								
☐ Other (Specify)								
Direction from well? North Distance from well? 200 ft.plus ft.								
10 FROM	ТО	LITHOLOGIC LOG	FRO)M	ТО	LITHO. LOG (cont.) or PI	LUGGING INTERVALS	
0		topsoil						
3	+= -	clay						
18		brown shale						
36		gray shale limestone						
110	120	TIMES COME					·	
			B.T. /					
	Notes:							
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) 19/.05/.2023 and this record is true to the best of my knowledge and belief.								
Kansas Water Well Contractor's License No 236. This Water Well Record was completed on (mo-day-year) 10/6/2023								
Kansas Water Well Contractor's License No 236 This Water Well Record was completed on (mo-day-year) 10/6/2023 under the business name of								
Mail I 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.								
Visit us at http://www.kdheks.gov/waterwell/index_html KSA 82a-1212 Revised 7/10/2015								