WATER WELL I		Form <b>V</b>		D	ivision of Water	·			
Original Record			in Well Use		sources App. N		Well ID	L	
1 LOCATION OF V			Fraction		ection Number	- 1		ge Number	
County: SEDGWI	NW1/4 SE1/4 SW1/4					R 2 ■E□W			
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance Business: RELPH CONSTRUCTION direction from nearest town or intersection): If at owner's address, check he									
Address: 8550 NW		nearest town or intersection): If at owner's address, check here:							
Address: 0550 1444	PANALLEL N	J			ONSTONE				
City: TOWANDA State: KS ZIP: 67144					KS 67230				
3 LOCATE WELL	4 DEPTH O	DE COMI	PLETED WELL.	90	f 5 Latitu	do:		(desired deserve)	
WITH "X" IN	Denth(s) Group	4 DEPTH OF COMPLETED WELL:90.  Depth(s) Groundwater Encountered: 1)40				t. 5 Latitude:			
SECTION BOX:		2) ft. 3) ft., or 4) \( \subseteq \text{Dry We}				ntal Datum: WGS 8	4   NAD	R3 $\square$ NAD 27	
	WELL'S STATIC WATER LEVEL:				Source	Source for Latitude/Longitude			
	below land surface, measured on (mo-day-yr).07/16/				16 □ GI	S (unit make/model:		)	
NW NE		above land surface, measured on (mo-day-yr)				(			
	Pump test data: Well water was					☐ Land Survey ☐ Topographic Map			
W	anter	Well water was ft.				Online Mapper:			
SW SE	after	after hours pumping gpm							
	Estimated Yiel	Estimated Yield:Z.Ogpm				6 Elevation:ft. Ground Level TOC			
S	Bore Hole Diameter:10.5 in. to90				Source: Land Survey GPS Topographic Map				
1 mile  in. to ft.									
7 WELL WATER TO BE USED AS: 1. Domestic: 5. ☐ Public Water Supply: well ID									
1. Domestic:  Household									
☐ Household 6. ☐ Dewatering: how many wells' ☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID									
☐ Livestock    Monitoring: well ID						12. Geothermal: how many bores?			
2. Irrigation 9. Environmental Remediation: well ID						a) Closed Loop			
3. ☐ Feedlot ☐ Air Sparge 4. ☐ Industrial ☐ Recovery			☐ Soil Vapor ☐ Injection						
4. Industrial	ner (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 CASING JOINTS: Glued Clamped Welded Threaded Casing diameter ft., Diameter in. to ft., Diameter in. to SDR-26.									
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									
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)									
SCREEN-PERFORATED INTERVALS: From .50 ft. to .90 ft., From ft., From ft., From ft.									
GRAVEL PACK INTERVALS: From 23 ft. to 90 ft., From ft. to ft., From ft., From ft. to ft.									
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other									
Grout Intervals: From									
Septic Tank									
☐ Sewer Lines		ss Pool	☐ Sewage La		Fuel Storage	☐ Aband	oned Water \		
■ Watertight Sewer Lines									
☐ Other (Specify) Direction from well? EAST Distance from well? 100+									
10 FROM TO		HOLOG		FROM		LITHO. LOG (cont.) o		GINTERVALS	
	TOP SOIL	HOLOG	LUG	1 KOW	<del>                                     </del>	LITTIO. LOG (COIII.) 0	LEGOGIN	O HATEKAMP9	
	CLAY			<del></del>	1		<del></del>		
	GREY SHALE				1 1		,		
	AQUA SHALE				<del>                                     </del>				
		ROWN SHALE							
	GREEN SHALI								
	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) 07/16/2016 and this record is true to the best of my knowledge and belief.  This Water Well Pacced was completed to 1884.									
Kansas Water Well Contractor's License No. 884 This Water Well Record was completed on (mo day-year) 07/19/2016 under the business name of WENINGER DRILLING. LLC									
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									