WATER WELL R			WWC-5		ision of Water				
Original Record			ge in Well Use		urces App. No.		Well ID		
1 LOCATION OF WATER WELL:			Fraction	Section Number Township Number				ge Number	
County: SEDGWICK SE¼ SE¼ SE¼ NW¼ 26 T 27 S R 2 ■E □									
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, dis Business: PRAIRIE CONSTRUCTION direction from pearest town or intersection): If at owner's address, cher									
Business: PRAIRIE CONSTRUCTION direction from nearest town or intersection): If at owner's address, check here:									
Address: PO BOX 275									
City. ROSE BILL State, NO 24: 07:55									
3 LOCATE WELL	1 A 116 P 1 P 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1								
WITH "X" IN SECTION BOX:		Depth(s) Groundwater Encountered: 1)43 ft.				de:			
SECTION BOA: N	2)	ft.	3) ft., or 4)	Dry Well	Horizon	al Datum: WGS 8	4 🗆 NAD 8	3 🗆 NAD 27	
	WELL'S ST	TER LEVEL:4	or Latitude/Longitude						
	Delow is	and surface	e, measured on (mo-day e, measured on (mo-day	-yr)	☐GPS				
NW NE			vater was		(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map				
W E			s pumping			Online Mapper:			
1 1 1 1 1	Well water was ft.								
SW SE	after hours pumping								
	Estimated Yield:20gpm				Source: Land Survey GPS Topographic Map				
S 1 mile	Bore Hole D	Bore Hole Diameter: 10.5 in. to 80 ft. and Source: Land Survey GPS Topogra							
7 WELL WATER TO BE USED AS:									
1. Domestic:			ater Supply: well ID		10. 🗆 Oil F	ield Water Supply: 1	ease		
☐ Household		6. Dewatering: how many wells?				11. Test Hole: well ID			
🖪 Lawn & Garden	7. Aquifer Recharge: well ID					d 🗌 Uncased 🔲			
☐ Livestock	_	8. Monitoring: well ID				12. Geothermal: how many bores?			
2. Irrigation			tal Remediation: well I			a) Closed Loop Horizontal Vertical			
3. ☐ Feedlot 4. ☐ Industrial						b) Open Loop Surface Discharge Inj. of Water 13. Other (specify):			
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:									
Water well disinfected? Yes No									
Cosing diagnoster 5 in to 80 ft Diagnoster in to ft Diagnoster in to ft									
8 TYPE OF CASING USED: Steel PVC Other									
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)									
SCREEN-PERFORATED INTERVALS: From 40 ft. to 80 ft., From ft. to ft. from ft. to ft.									
GRAVEL PACK INTERVALS: From 23 ft. to 80 ft., From ft. to ft., From ft. to ft.									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other									
Nearest source of possible	e contaminati	on:							
Septic Tank	_	ateral Lin			Livestock Pens		cide Storage	7. 21	
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well ■ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well									
					retuizer sura	Re 🗆 OT W	angas wen		
Other (Specify) Direction from well? EAST Distance from well? 42									
10 FROM TO		JTHOLO	GIC LOG	FROM	TO L	ITHO. LOG (cont.) o	r PLUGGING	INTERVALS	
	OP SOIL	_							
	CLAY			<u> </u>					
	IMESTONE								
22 80 5	SHALE								
				 		····			
				Notes:	LL.				
ivuico.									
				-					
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) 03/21/2017 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 884									
Kansas Water Well Con	tractor's Lice	nse No.	77 This W	ater Well Rec	ord was comp	leted of me-day-y	ear) 03/237	2017	
under the business name	OI XXIIVIN	<u>なれないな</u>	ch constructed well to: Vo	nege Domestine	of Health and E	using mont Parama CV	Inter Curre c	nation	
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Burcau 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									