		KECUKD		WWC-5			ion of Water				
				e in Well Use			rces App. No.			Vell ID	
		WATER W	ELL:	Fraction		Section	on Number	Township		Rang	ge Number
				SE 1/4 NW 1/4 NW 1/4			7		7 S	R 3	$\blacksquare E \square W$
	L OWNER			First:	Street or	Rural	Address wh	ere well is lo	cated (if	unknown,	distance and
	Business: PRAIRIE CONSTRUCTION direction from nearest town or intersection): If at owner's address, check									heck here:	
	Address: Address: PO BOX 275 1604 NORTH SHADOW ROCK DR., ANDOVER,67002										\n2
Address	. 0 00		a KC	777 OT 100	1004 140	חואכ	SHADOW	ROCK DR.,	ANDOV	ER,0/0	102
City:	ROSE	<u> </u>	State: KS	ZIP: 67133							
	3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL:1							•		6	decimal degrees)
				Encountered: 1)							
SECTI	SECTION BOA:						Longitud	1D-t	ICC 04 F	(0 1 ATATS 0	decimal degrees) 3 NAD 27
1	N	WELL'S	STATIC WA	TER LEVEL: 3	4 n	"				J NAD 8	3 LI NAD 2/
				, measured on (mo-day		019		Latitude/Lon			,
21887	NE			, measured on (mo-day)
IVW -	NE			vater was				WAAS enable	:u: 16	s LINO	")
w —	after hours numping					- Topograpmo map					
VV	Well water was									•••••	
SW -	SE	after.		pumping							
	Estimated Yield: 20.			gnm	8P	6 Elevation:			ft. 🗆	Ground J	Level TOC
	S Bore Hole Diameter:			11.5 in to 100	ft. and Source:						ographic Map
1 mile			in. to	ft. O				Other			
7 WELL WATER TO BE USED AS:											
1. Domesti				ter Supply: well ID			10 🗆 O:LE:	ald Water Com	-l l		
							10. U Oli Fi	eld Water Supp	ny: lease	••••••	
			: how many wells?			11. Test Hole: well ID					
				charge: well ID			☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?				
	Livestock 8. Monitoring: well ID										
	2. ☐ Irrigation 9. Environmental Remediation: well ID						a) Closed Loop Horizontal Vertical				
3. Feedlot Air Sparge Soil Vapor Ext							b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):				
4. 🔲 Indus			Recovery				13. U 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											
Casing diameter 5 in to 100 ft. Diameter in to ft. Diameter in to											
Casing diameter 5 in. to 100 ft., Diameter in. to ft., Diameter in. to ft. Diameter in. to ft. Casing height above land surface 20 in. Weight lbs./ft. Wall thickness or gauge No. SDR-26											
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: From30											
SCREEN-	PERFURAI	ED INTERV	ALS: From	II. to	π., Fro	m	п. ю	froi	n	π. to	π.
GRAVEL PACK INTERVALS: From											
9 GROUT	Γ MATERI	AL; Neat	cement \square	Cement grout 💹 Bei	ntonite [Othe	т				
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
		le contaminat									
☐ Septic		_	Lateral Lines			_	estock Pens	☐ In:	secticide S	torage	
☐ Sewer		_	Cess Pool	☐ Sewage Lag			el Storage		bandoned \	Water We	ell
■ Watertight Sewer Lines											
Other (Specify)											
Direction from well? WEST Distance from well? .78 ft.											
10 FROM	TO		LITHOLOG	ICLOG	FROM		TO LIT	HO. LOG (con	t.) or PLU	GGING I	NTERVALS
0	2	TOP SOIL									
2		CLAY									
14		LIMESTON	F								
41		GRAY SHA				-					
7!	100	CITATI OTIA	<u> </u>			_					
						+				_	
	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). (322019 and this record is true to the best of my knowledge and helief											
Kansas Water Well Contractor's License No. 884 This Water Well Record was completed on (mo-day-year) 8/27/2019											
under the bu	usiness nam	e of .WENIN	iger.drjl	LING, LLC		Signat	ure Ylai	to Kryfi	in		
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, Top	eka, Kansas 66	6612-1367. Mail one to W	ater Well O	wner an	nd retain one for	your records. Te	elephone 78	5-296-552	4.
Visit us at http	://www.kdheks	.gov/waterwell/i	ndex.html	k	SA 82a-	1212			Re	vised 7/1	10/2015