WATER WELL	L RECORD	Form W	WC-5	Divi	sion of Water	1		
Original Record	Correction [Change i	n Well Use		urces App. No.		Well ID	
1 LOCATION O			raction	Sec	tion Number	Township Numb		
County: Butler			SW 1/4 SW 1/4 SE 1/4	1/4	7	T 27 S	R 3 ■ E □ W	
2 WELL OWNE	R: Last Name:						(if unknown, distance and	
Business: Fahsholtz Construction Inc direction from nearest town or intersection): If at owner's address, check								
Address: 11927 E Shannon Way Ct 1317 Shadow Rock Dr. Andover, KS 67002								
Address: City: Wichita State: KS ZIP: 67206								
3 LOCATE WELL				405				
WITH "X" IN	4 DEPTH	4 DEPTH OF COMPLETED WELL:105 ft.					(decimal degrees)	
SECTION BOX:		Depth(s) Groundwater Encountered: 1)				Longitude:		
N		WELL'S STATIC WATER LEVEL: ft.						
	1	below land surface, measured on (mo-day-yr)				Source for Latitude/Longitude: GPS (unit make/model:)		
NW NE		above land surface, measured on (mo-day-yr)				(WAAS enabled? ☐ Yes ☐ No)		
		Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map		
w	E after	after hours pumping gpm				Online Mapper:		
SW SE		Well water was ft.						
l i k i		after hours pumping gpm				n :ft	t. Ground Level TOC	
S	Bore Hole Di	Estimated Yield:gpm Bore Hole Diameter:10" in. to105 ft. and				Source: Land Survey GPS Topographic Map		
	1 mile Other							
7 WELL WATER TO BE USED AS:								
1. Domestic:	5. 🔲 1	Public Water	Supply: well ID				ease	
☐ Household	6. 🔲 🛚	6. Dewatering: how many wells?				11. Test Hole: well ID		
Lawn & Garden		7. Aquifer Recharge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical		
Livestock		8. Monitoring: well ID				12. Geothermal: how many bores?		
2. ☐ Irrigation 3. ☐ Feedlot		9. Environmental Remediation: well ID				a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water		
4. Industrial		Recovery	☐ Injection	Sanachon			isonargo ing. or water	
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:								
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded								
Cosing diameter 5" in to 105 ft Diameter in to ft								
Casing diameter 5" in to 105 ft., Diameter in to ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 12" in Weight 160 lbs./ft. Wall thickness or gauge No.								
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 23' ft. to 105 ft., From ft. to ft., From ft.								
9 GROUT MATERIAL: Neat coment Cement grout Bentonite Other								
Grout Intervals: From								
Nearest source of possible contamination:								
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage								
☐ 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?	Fast		Distance from	 dia 30+		Δ		
10 FROM TO		THOLOGI		FROM			r PLUGGING INTERVALS	
0 3	dirt	THOLOGI	C LOG	TROM	10 LI	1110, LOG (cont.) 0	LI LOGGING INTERVALS	
3 40	clay							
40 85	shale			1				
85 105	shaley lime							
				Notes:		4.5		
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged								
under my jurisdictie	on and was comple	ted on (mo	-day-year) .7/24/20	0.1.6 and	this record is t	rue to the best of m	ny knowledge and belief.	
Kansas Water Well Contractor's License No. 493 This Water Well Record was completed on (mo-day-year) 11/30/19 under the business name of Reiserer Well Drilling Signature Jany Reiserer								
Mail 1 white co	valong with a fee of \$	yy.♥.U.₩.U.U.U.U. 5.00 for each a	constructed well to: Van	sas Denartment	of Health and For	viconment Rureau of W	Vater GWTS Section	
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, 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.k				KSA 82a-12		у такова такова	Revised 7/10/2015	