WATER WELL R		WWC-5		ision of Water				
Original Record		ge in Well Use	Resc	ources App. No.		Well ID		
1 LOCATION OF W	ATER WELL:	Fraction	Sec	tion Number	Township Numl			
County: Butler		SE14 NE14 SE1	4 1/4	6	T 27 S	R 3 ■E □ W		
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and								
Business: Paul Gray			direction from nearest town or intersection): If at owner's address, check here:					
	ock Rd. Suite 200	1						
Address: 111 Capstone Ct, Andover, KS 67002								
City: Wichita State: KS ZIP: 67206								
3 LOCATE WELL WITH SYN IN 4 DEPTH OF COMPLETED WELL: 78 ft 5 Latitude: (decir								
WITH "X" IN				5 Latitude:(decimal degrees)				
SECTION BOX:	Depth(s) Groundwater		Longitude:(decimal degrees)					
2) ft. 3) ft., or 4) \(\bullet \) Dry				ft. Source for Latitude/Longitude:				
WELL'S STATIC WATER LEVEL: below land surface, measured on (mo-day-yr)								
NW NE	above land surface, measured on (mo-day-yr)				(WAAS enabled? Tyes No)			
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map			
W	E after hours pumping gpm				Online Mapper:			
SW SE	Well water was ft.							
	arter Hours pumping					6 Elevation:ft. Ground Level TOC		
	S Estimated Yield:gpn Bore Hole Diameter:10"			o Elevation				
S								
	1 mile in. to ft.							
7 WELL WATER TO BE USED AS:								
1. Domestic:	5. Public Wa	ater Supply: well ID		10. 🔲 Oil F	ield Water Supply: 1	lease		
☐ Household		ng: how many wells?		11. Test Hole: well ID				
Lawn & Garden			d Uncased 🔲					
Livestock					12. Geothermal: how many bores?			
2. Irrigation	9. Environmental Remediation: well ID				a) Closed Loop			
3. ☐ Feedlot					b) Open Loop Surface Discharge Inj. of Water			
4. Industrial	☐ Recovery		Extraction					
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:								
Water well disinfected?								
8 TYPE OF CASING	USED: ☐ Steel ■ PV	C Other	CASI	NG JOINTS:	■ Glued □ Clampe	ed Welded Threaded		
Casing diameter 5" in to 18 ft. Diameter in to ft. Diameter in to ft.								
Casing diameter 5" in to 78 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								
Louvered Shutter								
SCREEN-PERFORATED INTERVALS: From .58								
CDAVEL PAGE TOTAL OF THE CONTROL OF								
GRAVEL PACK INTERVALS: From								
9 GROUT MATERIAL: Neat cement 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? North Distance from well? .30+								
Direction from well?NO	rth	Distance from v	vell? .30+	·	fi	t.		
10 FROM TO	LITHOLO	GIC LOG	FROM	TO LI	THO. LOG (cont.) o	or PLUGGING INTERVALS		
0 3	dirt							
	clay							
	shaley lime				C.3. 3			
00 10	andie y iii ii le		-					
			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) .3/9/1.7 and this record is true to the best of my knowledge and belief.								
Kansas Water Well Contractor's License No. 493 This Water Well Record was completed on (mo-day-year) .1.1/30/19								
under the husiness name	e of Reiserer Well Dr	rillina	Q;	ond was comp	LOSDIA POIN	1000		
Mail 1 white conv alo	ong with a fee of \$5.00 for ear	ch constructed well to: Ka	nsas Denartment	of Health and F	ironmero Bureau of W	Vater, GWTS Section		
under the business name of Reiserer Well Drilling Signature Larry Raisana. Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Enfronment 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		1007. Hitti Olie IO	KSA 82a-12		io, your records. Telep	Revised 7/10/2015		
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