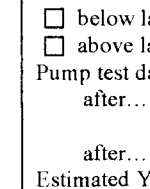


☒ Original Record ☐ Correction ☐ Change in Well Use

Well ID

1 LOCATION OF WATER WELL: County: Butler		Fraction NE ¼ NE ¼ NW ¼ ¼	Section Number 31	Township Number T 28 S	Range Number R 3 E																																																						
2 WELL OWNER: Last Name: Anderson First: Mike Business: Address: 1250 N Countrywalk Circle City: Rose Hill State: KS ZIP: 67133			Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: ☒																																																								
3 LOCATE WELL WITH "X" IN SECTION BOX: N  S -----1 mile-----	4 DEPTH OF COMPLETED WELL:80..... ft. Depth(s) Groundwater Encountered: 1) ft. 2) ft. 3) ft., or 4) ☐ Dry Well WELL'S STATIC WATER LEVEL: ft. ☐ below land surface, measured on (mo-day-yr)..... ☐ above land surface, measured on (mo-day-yr)..... Pump test data: Well water was ft. after..... hours pumping gpm Well water was ft. after..... hours pumping gpm Estimated Yield:gpm Bore Hole Diameter:10"..... in. to80... ft. and in. to ft.		5 Latitude:(decimal degrees) Longitude:(decimal degrees) Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27 Source for Latitude/Longitude: ☐ GPS (unit make/model: (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map ☐ Online Mapper:																																																								
	6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map ☐ Other																																																										
7 WELL WATER TO BE USED AS: 1. Domestic: ☐ Household ☐ Public Water Supply: well ID ☒ Lawn & Garden ☐ Dewatering: how many wells? ☐ Livestock ☐ Aquifer Recharge: well ID 2. ☐ Irrigation ☐ Monitoring: well ID 3. ☐ Feedlot ☐ Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Extraction 4. ☐ Industrial ☐ Recovery ☐ Injection 10. ☐ Oil Field Water Supply: lease 11. Test Hole: well ID ☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores? a) Closed Loop ☐ Horizontal ☐ Vertical 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																																																											
8 TYPE OF CASING USED: ☐ Steel ☒ PVC ☐ Other CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded Casing diameter5"..... in. to80..... ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface12"..... in. Weight160..... 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: From40..... ft. to80..... ft., From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From23'..... ft. to80..... ft., From ft. to ft., From ft. to ft.																																																											
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other Grout Intervals: From3'..... ft. to23'..... ft., From ft. to ft., From ft. to ft. 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? Distance from well?10+..... ft.																																																											
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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) 8/6/2013 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) 10/30/19 under the business name of Reiserer Well Drilling Signature: Jerry Reiserer 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.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015																																																											