		RECORD	Form \				ivision of W						
		Correction	Change	in Well Use	,		sources App				ell ID		
		WATER WE	17	Fraction 450	Ciz)	SFS	ection Num	ber	Township Nu			ge Number	
		down		1/4 DC 1/2	3 1/4 3 1/4				T29			DE W	
2 WELL OWNER: Last Name: Haun First: Street or Rural Address where well is located (if unknown, distance and													
direction from hearest town or intersection): If all overlier's address, check he												heck here:	
Address: Hayswill State: KA ZIP: 67233 2500 E 79.ts s.													
City:	Tays	wille	State: KA	ZIP: 670	3)				, , , , ,	•			
3 LOCA	TE WELL	4 DEPOT		PLETED W		30	5						
WITH	"X" IN						1						
1	ON BOX:			ncountered: 1					e:				
2)							LDry Well Jatum: WGS 84 NAD 83 NAD 27						
below land surface, measured on (mo-day-									Latitude/Longit unit make/mode			,	
above land surface, measured on (mo-day-													
Pump test data: Well water was ft												••	
w	·						gpm Online Mapper:						
SW	SW								The second secon				
	arter Hours pumpinggp							ration	•	4 П	Ground	Lavel T TOC	
	Estimated Yield:gpm								Land Survey				
h1	S Bore Hole Diameter:						3000		-				
mile in. to													
	Household 6. Dewatering: how many wells?												
	Lawn & Garden 7. Aquifer Recharge: well ID											•••	
Livest	Livestock 8. Monitoring: well ID								al: how many bo				
2. 🗌 Irrigat	2. Irrigation 9. Environmental Remediation: well ID.								Loop Horiz				
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex							b) (Open L	oop Surface	Dischar	ge 🔲 I	nj. of Water	
4. 🔲 Indust	trial		Recovery	☐ Inje	ction	_	13. 🔲 (Other (specify):				
Was a chemical/bacteriological sample submitted to KDHE? Yes You If yes, date sample was submitted:													
Water well disinfected? Yes No													
8 TYPE OF CASING USED: Steel X PVC Other CASING JOINTS: MGlued Clamped Welded Threaded													
Casing diameter													
Casing height above land surface													
☐ Steel		inless Steel	☐ Fiberg		PVC			ther (S	pecify)		· • • • • • • • • • • • • • • • • • • •	*******	
☐ Brass		vanized Steel	Concre	te tile 📋	None us	ed (open ho	le)						
. <u> </u>		RATION OPE					S 411 1 1 1 1		0.1 (0 (0)				
	nuous Slot	Key Punch	U Gau امم	ze Wrapped			Drilled Holes None (Open 1		Other (Specify)				
SCREEN-	PERFOR AT	ED INTERVA	ICU LIWII	29 e 6	7 5 5 W	e Error	none (Open	noie)	A Erom		ft to	A	
G	RAVEL PA	CKYNTERVA	HC. From		Ž.,,	it., Fioni		to	A From	• • • • • • • • • • • • • • • • • • • •	ft to	A	
9 GROUT	MATERI	AL: Neat c	ement D	Cament grout	M Par	tonite \square	Other		11., 110111		. 14, 10	,	
Grout Interv	als: From		/9/	A From	K25000	to	odici	• • • • • • • • • • • • • • • • • • •	ft to		A		
Nearest sou	rce of possib	le contaminatio	.yy	, 1 10111	L		10, 11011	• • • • • • • •	11. 10	• • • • • • • • •			
☐ Septic	Tank		ateral Lines	☐ Pit l	Privy		Livestock P	ens	□ Inse	cticide S	torage		
Sewer			Cess Pool		vage Lag	oon 🗆	Fuel Storage	e	☐ Abai	ndoned '	Water W	'ell	
	ight Sewer L	ines 🔲 S	eensoe Pit	☐ Fee	dyard		Fertilizer St	orage	☐ Oil \	Well/Gas	: Well		
Other (17/20	Jania			46	;						
Direction fro		. L. J. T.		Distance	from we								
10 FROM	TO	<u></u>	<u>ITHOLOGI</u>	CLOC		FROM	TO	LITE	O. LOG (cont.)	or PLU	GGING	INTERVALS	
-	10,	10/	100		<u> </u>	- 17		ļ					
51	7/		ing	Jon.						*	,		
4	39	<u> </u>	wo_	Lon -	00	nd		<u> </u>					
	 						 						
	 		······································	· · · · · · · · · · · · · · · · · · ·				<u> </u>					
***************************************	ļI					NT. 1	L	L					
	 			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		Notes:							
·	ļl												
11 CONTRACTIONS ON LANDOUGHERIS CHRONICAL MICH.													
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo day-year)													
Kansas Water Well Contractor's Litense No. This Water Well Record was completed on (mo-day-year)													
under the business name of Downlay Tungs Tungs													
INSTRUC	CTIONS: Send o	ne copy to WATER	WELL OWNER	and retain one co	ny for your	records. Subm	it fec of \$5.00 fo	r each co	onstructed well along	with one (white) cop	y to Kansas	
	Department of H	ealth and Environme	nt, Bureau of W	ater, Geology Sect	ion, 1000 S	W Jackson St.,	Suite 420, Topel	ka, Kans	as 66612-1367. Tele	phone (78:	5) 296-356	3.	
Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565. Visit us at http://www.kdhcks.gov/waterwell/index.html KSA 82a-1212 Revised 9/10/2012											Kevised	9/10/2012	