	WELL R		m WWC-5			on of Water		1		
Original	Record [Correction C	hange in Well Use			rces App. No.		│ Well II		
1 LOCAT	ION OF WA	ATER WELL:	Fraction			on Number	Township Num	l l	Range Number	
County: Sedgwick			NW 4SW 4NW	1/4 NW 1/4	35		T 29 S	R	1 x E \square W	
2 WELL	OWNER: L	ast Name: TEDMAN	First: Terry		reet or Rural Address where well is located (if unknown, distance and					
Business:			_	direction	from ne	arest town or int	ersection): If at owne	r's addres	s, check here: 💌	
Address: 11208 S. Hillside Ave										
Address:	_	Cr + -1	Kangag 710, 67011							
	Mulvane	State: 4	Kansas ZIP: 67211			1				
3 LOCATI		4 DEPTH OF C	COMPLETED WELL	ft.	5 Latitude: 37.48916 (decimal degrees)					
WITH "Y			vater Encountered: 1)	1	de: -97, 29648					
SECTION BOX: Depth(s) Groundwater Encountered: 1)					ell		al Datum: WGS			
WELL'S STATIC WATER LEVEL: 13							r Latitude/Longitude:			
		below land sur	face, measured on (mo-day	, measured on (mo-day-yr)05/02/23			■ GPS (unit make/model: iPhone)			
×- NW	NE	face, measured on (mo-day	-yr)			(WAAS enabled? [
Pump test data: Well v			Vell water was				☐ Land Survey ☐ Topographic Map			
W E after hour			hours pumping				ne Mapper:			
		V	Vell water was	ft.						
SW	SE	after	hours pumping	gpm		(Elamatic	6 Elevation :ft. ☐ Ground Level ☐ TOC			
Estimated Yield:			gpm						Tanaanan hia Man	
			er: 12 in. to 40					nd Survey ■ GPS ☐ Topographic Map		
1 r	nile		in. to	ft.	☐ Other					
		BE USED AS:								
1. Domestic:		5. 🗌 Publ	ic Water Supply: well ID				ield Water Supply:			
	■ Household 6. Dewatering: how many wells?					11. Test Hole: well ID				
☐ Lawn d		ifer Recharge: well ID		Cased Uncased Geo						
☐ Livest	☐ Livestock 8. ☐ Monitoring: well ID									
	☐ Irrigation 9. Environmental Remediation: well ID						a) Closed Loop			
	B. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extraction						b) Open Loop Surface Discharge Inj. of Water			
4. Industrial Recovery Injection 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 diameter . 5 in. to										
TYPE OF SCREEN OR PERFORATION MATERIAL:										
☐ Brass ☐ Galvanized Steel ☐ Concrete file ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:										
Continuous Slot										
□ Louvered Shutter □ Key Punched □ Wire Wrapped ■ Saw Cut □ None (Open Hole)										
SCREEN-PERFORATED INTERVALS: From 30										
SCREEN-	PENFORA I	CU INTERVALS.	From 24 ft. to 40	ft F	rom	ft to	ft. From .	f	it. to ft.	
0.0001	KAVEL PA	CK INTERVALS.	110111 2411. 10.48	1 D		41				
9 GROUT	MATERIA	AL: Neat cemer	nt Cement grout	Bentonite	ЦΟ	ther	ft to	fi		
			ft., From	п. ю		n., From	11. 10		•	
		ble contamination:	LT: D'a D'a Daire			Livestock Pen	, Inco	cticide Sto	rnga	
■ Septic		☐ Latera		y Lacasa		Fuel Storage		idoned Wa		
Sewer		Cess								
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify)										
Other	(Specify)	 13+h	Distance from	 well9.100	£+	plus	fi			
		¥ 144 1 17511	OLOGIC LOG			то І	JTHO LOG (cont.)	or PLUG	GING INTERVALS	
10 FROM	TO		OFORIC FOR	FRO	JIVI	10 1				
0	3	topsoil								
3	10	clay								
10	27	fine sand								
27	40	medium sand								
	37 197									
	Notes:									
	1 1									
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) 95/.92/.2023 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 236 This Water Well Record was completed on (mo-day-year) 5/.3/.2023 under the business name of										
Kansas W	ater Well Co	ntractor's License N	o236 This Wa	iter Well Ro	ecord v	was com <u>ple</u> te	d on (mo-day-year)	5./.3./2.0	23	
under the	business nai	me ofHa	orp. Well and Pump. Se	ervice	Siş	gnatureT.od	d SHarp			
Mail 1	white conv alo	ng with a fee of \$5.00 fo	or each constructed well to: K	Cansas Depar	ment of	t Health and Env	aronment, Bureau of v	vater, Gw i	is 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 h	ttp://www.kdhe	eks.gov/waterwell/index	.html	KSA 8	32a-12	212		Rev	vised 7/10/2015	