WATER		Division of Water												
	l Record					Resources App. No			Township Number		Well ID Range Number			
1 LOCATION OF WATER WELL: Fraction									•	1	ge Number ■ E □ W			
County: I'M 52 52														
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and														
Business: FAHSHOLTZ CONSTRUCTION Address: PO Box 818						direction from nearest town or intersection): If at owner's address, check here:								
Address: Address:	FO ROX 8	10												
	Andover	State	Kansas ZIP: 670	02	266 \$.	Cec	iar Ranci	n Ct. De	rby, Kar	sas	67037			
	2 LOCATE WOLL							00 0 0 0 0 00 0000						
WITH "Y" IN 4 DEPTH OF COMPLETED WELL: ANN IL 5 Latitude: AMARAAA														
SECTIO	N BOX:													
2) ft. 3) ft., or 4) \(\subseteq WELL'S STATIC WATER LEVEL: 39						Horizontal Datum: WGS 84 LI NAD 83 LI NAT Source for Latitude/Longitude:								
	■ below land surface, measured on (mo-day-y					22 ·				one.	)			
, ,	NE	face, measured or	ı (mo-day-y	/r)		E GI		abled? $\square$ Y						
! ! .	1 , 1		est data: Well water was ft.			☐ Land Survey ☐ To								
w   ×	🔼							Online Mapper:						
		Vell water was	f											
SW	SE	after hours pumping gp			gpm	6 Elevation:ft. Ground Level TOC								
		Estimated Yield:	Estimated Yield:gpm				Source: Land Survey			PS Topographic Man				
	S	Bore Hole Diamete	Bore Hole Diameter: 12 in. to 100 f							- Coro - Topograpine Wap				
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID														
1. Domestic:				11. Test Hole: well ID										
_	] Household 6. ☐ Dewatering: how many wells?  7. ☐ Aquifer Recharge: well ID							ed Unca						
☐ Livest				12. Geothermal: how many bores?										
2. Irrigat														
3. ☐ Feedle	- •						b) Open Loop  Surface Discharge  Inj. of Water							
4. 🗌 Indust	rial	☐ Reco	overy $\square$	Injection			13. 🗌 Oth	er (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														
Casing height above land surface														
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 40														
9 GROUI	MATERIA	L: Neat cemer	it Cement gr	rout 💌 i	Sentonite		ther			Α				
		1 ft. to24	It., From	• • • • • • • • • • • • • • • • • • • •	. It. to	• • • • • • •	It., From .	11	10	IL.				
Nearest source of possible contamination:   Septic Tank														
Sewer		☐ Cess 1		Sewage I		_	Fuel Storage		☐ Abandon					
■ Watertight Sewer Lines														
Other	(Specify)							•						
Direction from well? South Distance from well? 5.0 .ft. plus ft.														
10 FROM	ТО	LITH	OLOGIC LOG		FRO	M	TO	LITHO. LOC	G (cont.) or F	PLUGGIN	NG INTERVALS			
0		topsoil												
3	<del></del>	clay								!				
36		brown shale												
45		gray shale												
78	100	limestone and	gray shal	.e										
	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) 11/03/2022 and this record is true to the best of my knowledge and belief.														
under my	jurisdiction	and was completed	on (mo-day-yea	ar) † † \' \' \' \' 3	1.4.022	and th	nis record is	true to the	best of my	knowled	ige and belief.			
Kansas Wa	ater Well Con	ntractor's License N	0 4.シワ rp Well and Di	This Wate	r Well Re	cord v	vas complete	a on (mo-da d SHarn						
Moil 1	white copy alor	ne ofHa	r each constructed	well to Ka	nsas Denarti	ment of	Health and Fr	vironment Ru	reau of Water	GWTS Se	ection,			
1000 S	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.													
1		ks.gov/waterwell/index							•		d 7/10/2015			
THE PARTY AND THE LA		THE PERSON NAMED IN PARTY AND PARTY OF TAXABLE PARTY.												