WATER				WWC-5		rision of Water		*** 11 775		
	Record \square			e in Well Use		ources App. No		Well ID		
1 LOCATION OF WATER WEL			LL:	Fraction		tion Number	Township Number		nge Number	
	SEDGWIC			NW 1/4 SE 1/4 NE 1/4		18	T 29 S		2 ■E□W	
2 WELL OWNER: Last Name: MIRANDA First: JENNY Street or Rural Address where well is located (if unknown, distance and										
Business: direction from nearest town or intersection): If at owner's address, check here:										
Address: 1231 E. SONTAG CIR Address:										
City: DERBY State: KS ZIP: 67037										
3 LOCATE										
WITH "X				IPLETED WELL:		. 5 Latitud	le:37.:33.140		.(decimal degrees)	
SECTION				Encountered: 1)		Longit	Longitude:97.24602(decimal degrees) Horizontal Datum: ■ WGS 84 □ NAD 83 □ NAD 27			
N								∐ NAD	83 ∐ NAD 27	
		WELL'S STATIC WATER LEVEL:				Source	Source for Latitude/Longitude: GPS (unit make/model: I-PHONE)			
1	' x	above land surface, measured on (mo-day-yr)					(WAAS enabled? Yes No)			
NW	NE	Pump test data: Well water was ft.				WAAS enabled?				
		after hours pumping gpm				Online Mapper:				
W	E	Well water was ft.				Оппис маррет				
SW	SE	after hours pumping gpm								
		Estimated Vield: onm				6 Elevation:ft. Ground Level TOC				
S		Bore Hole Diameter:12 in. to120			ft. and	and Source: Land Survey GPS Topographic Map				
1 m	ile	in. to ft.								
7 WELL WATER TO BE USED AS:										
1. Domestic:	1. Domestic: 5. Public Water Supply: well ID									
☐ Househ		6. [Dewaterir	ng: how many wells?		11. Test Hole: well ID				
Lawn &	c Garden			echarge: well ID			ed Uncased G			
☐ Livesto	☐ Livestock 8. ☐ Monitoring: well ID									
2. 🗌 Irrigatio							a) Closed Loop Horizontal Vertical			
	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor I					b) Open Loop				
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 120 ft., Diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 12 in. Weight 2.35 lbs./ft. Wall thickness or gauge No. SDR26										
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										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From										
		le contamina		an Dit Dairer	r	Livestock Per	s 🔲 Insectic	ide Storac	TA .	
☐ Septic			Lateral Lin Cess Pool	es		Fuel Storage	Is ☐ Insectic			
Sewer 1	Lines icht Sower I i		Cess Pool Seepage Pi		gоон <u>г</u>	Fertilizer Stor				
☐ Other (Specify) Direction from well? NORTH WEST Distance from well? 49'+ ft.										
10 FROM	TO		LITHOLO		FROM	TO	LITHO. LOG (cont.) or	PLUGGI	NG INTERVALS	
0		TOP SOIL								
3		CLAY								
56		MEDIUM S	ΔΝΠ							
60		BROWN SI								
		GRAY SHA								
67	120	CINAL SITE	\ <u></u>							
					Notes:	1				
TAULES.										
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) 3-15-2024 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 236										
Kaneae Wa	iter Well Co	ntractor's Li	icense No	236 This W	ater Well R	ecord was con	apleted on (mo-day-ve	ear) 3-18	3-2024	
under the h	usiness nam	ne of HARE	, WELL A	ND PUMP SERVICE	<u> </u>	Signaturel.Q.	NN'2'44KL			
Mail	1 white copy al	long with a fee	of \$5.00 for e	ach constructed well to: Ka	nsas Departme	nt of Health and	Environment, Bureau of W	ater, GWTS	S 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										