WATER WELL R		Form WW			ision of Water							
Original Record					ources App. No		Well ID					
1 LOCATION OF W		L: Frac	tion //NW/	Sec Sec	tion Number	Township Numl						
County: SA	LINE	15.0 - 14.0 First	10 W 14 V W 14	Street or Du	rol Address v	hara well is located	RQ DE W					
2 WELL OWNER: Last Name: HUSCHED First: CHARKE Street or Rural Address where well is located (if unknown, distance and Business: 11015 First: CHARKE 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:												
Address: 1121 E, M. N. EAPOLIS direction from nearest town or intersection): If at owner's address, check here: 2												
Address: 1191 E. MINNEAPOLIT Address: SALINA State: KN ZIP 67401 1191 E. MINNEAPOLIS												
city.												
3 LOCATE WELL WITH "X" IN	4 DEPTH	OF COMPLE	TED WELL:	5 ft	. 5 Latitud	łe:	(decimal degrees)					
SECTION BOX:	Depth(s) G	roundwater Encou	ntered: 1)	7 ft.	ft. Longitude:(decimal degrees)							
N SECTION BOX.			ft., or 4									
	WELL'S STATIC WATER LEVEL: below land surface, measured on (mo-day- above land surface, measured on (mo-day-					for Latitude/Longitude						
						GPS (unit make/model:						
NW NE	Pump test data: Well water was				· (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map							
w E					Online Mapper:							
''	Well water was ft.											
■ SW SE	anternamento paniping											
	Estimated Y	lield:agp	m Z7	6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map								
S mile	Bore Hole Diameter:9 in. to				Other							
1 mile in. to ft.												
1. Domestic:			nnly: well ID		10 □ Oil	Field Water Sunnly: 1	ease					
☐ Household	□ Public Water Supply: well ID □ Dewatering: how many wells?											
Lawn & Garden					☐ Cased ☐ Uncased ☐ Geotechnical							
Livestock	8. Monitoring: well ID				12. Geothermal: how many bores?							
2. Irrigation	9. Environmental Remediation: well ID					a) Closed Loop						
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extrac				b) Open Loop Surface Discharge Inj. of Water							
4. Industrial Recovery Injection 13. Other (specify):												
Was a chemical/bacteriological sample submitted to KDHE? Yes You If yes, date sample was submitted:												
Water well disinfected?	Yes L	No Taxas		CAOD	IC IODITO	~						
8 TYPE OF CASING USED: ☐ Steel ▼PVC ☐ Other												
Casing diameter												
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, Cauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)												
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)												
SCREEN-PERFORATED INTERVALS: From												
O CPOUT MATERIA	I Neat	cement \square Cem	ent grout Dear	tonite \square		It., FIOIII	IL. 10 II.					
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From ft. to ft., From ft. to ft.												
Nearest source of possible					,							
☐ Septic Tank		Lateral Lines	☐ Pit Privy		Livestock Pen	_	icide Storage					
	☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well											
Other (Specify) Direction from well?	LIFCT	•••••	Distance from we	112 30		f	.					
10 FROM TO		LITHOLOGIC L		FROM			or PLUGGING INTERVALS					
		IET		110		21110.200 (4011)	T BO O O II TO II T I I I I I I I I I I I I					
3 18		TAN SILT	ГУ.									
18 29		LOOM T										
29 37	SAND		MED. TAK)								
	Notes:											
11 CONTRACTORS	ODIAND	OWNED'S CE	DTIFICATION	· This water	r wall was	constructed Design	anatruated on I -1					
under my jurisdiction and was completed on (mo-day-year) 2. 1. 1. and this record is true to the best of my knowledge and belief												
Kansas Water Well Cor	ntractor's Lic	ense No. c.3.		ter Well Rec	ord was com	pleted on (mo-day-v	/ear) 09 - 78 - 13					
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). It is water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year). It is water well Record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 13.45												
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas												
Donortment of II	oalth and Envisor-	nent Ruranu of Water	Geology Section 1000	SW Jackson Ct 4	Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.							

KSA 82a-1212

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Visit us at http://www.kdheks.gov/waterwell/index.html