(DRL)

			Form V			vision of Wate	1	7			
Original Record Correction Change in Well Use						ources App. N		Well ID			
1 LOCATION OF WATER WELL: Fraction SW 1/4 NE 1/4 NW 1/4						Section Number Township Number Range Number T 21 S R 9					
	2 WELL OWNER; Last Name: Bass First: Jeremy Str						or Rural Address where well is located (if unknown, distance and				
Business: Business: Girection Rulai Address where were is located (it aligness), direction from nearest town or intersection): If at owner's address, check here:											
Address:	Address:										
Address: 203 Western Row											
City: Alden State: Ks ZIP: 67512 3 LOCATE WELL A DEPTH OF COMPLETED WELL: 47 9 5 1 44469											
1	WITH "Y" IN 4 DEPTH OF COMPLETED WELL:										
	SECTION ROX. Depth(s) Groundwater Encountered: 1)										
2)						Pry Well Horizontal Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude:					
below land surface, measured on (mo-d					(r) 5/17/2019	5/17/2019 GPS (unit make/model: Garman 62S					
NW	above land surface, measured on (mo-day-y					. •	(WAAS enabled?				
	Pump test data: Well water was					☐ Land Survey ☐ Topographic Map					
W							Online Mapper:				
sw	Well water was ft. after hours pumping gg										
Estimated Vield gram				gnm		6 Eleva	ition:1720	n: 1720ft. Ground Level TOC			
	S	Bore Hole	Diameter:	1.1 in. to47	·			☐ Land Survey ☐ GPS ☐ Topographic Map ☐ Other			
1 milein. toin. to							Other		• • • • • • • • • • • • • • • • • • • •		
7 WELL WATER TO BE USED AS:											
1. Domestic: 5. ☐ Public Water Supply: well ID ■ Household 6. ☐ Dewatering: how many wells?											
I ==	☐ Lawn & Garden										
_	☐ Livestock Monitoring: well ID						12. Geothermal: how many bores?				
2. Irrigat	2. ☐ Irrigation 9. Environmental Remediation: well ID.					a) Cl	a) Closed Loop				
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex					xtraction		b) Open Loop Surface Discharge Inj. of Water				
4. Industrial Recovery Injection											
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 37 ft., Diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 18 in. Weight 160 lbs./ft. Wall thickness or gauge No. 214											
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											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
Nearest sou	rce of possit	le contaminat				,					
☐ Septic		_	Lateral Line		_	Livestock Pe		cticide Storage			
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoo ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard						on					
Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify)											
Direction from well? .West Distance from well? .15 ft.											
10 FROM	TO		LITHOLOG		FROM	TO		or PLUGGING INTER	VALS		
0	8	Top soil sar									
8	33	Gravel w/fin									
33	40			el & clay mix							
40	47	Fine sand &	gravel mi	X							
					D7 - 4						
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)											
under my jurisdiction and was completed on (mo-day-year)											
under the b	usiness nan	e of Rosen	<u>crantz-Ber</u>	nis Ent	Si	gnatureC	ملائد لاسم	Water CWTS Section			
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. West use of http://www.kdheks.gov/umtenwell/index.html KSA 82a-1212 Revised 7/10/2015											