WATER W				WWC-5		vision of Water	20230024	Well ID 6 2305	
Original R				e in Well Use		ources App. No	Township Number	Well ID	
1 LOCATIO			L:	Fraction	Sec	ction Number	T 25 S	R 12 DE W	
County: AG+45rCl CS									
If of owner's address check here.									
Business: Sterling Drilling direction from nearest town or intersection): If at owner's additional direction from nearest town or intersection): If at owner's additional direction from nearest town or intersection): If at owner's additional direction from nearest town or intersection): If at owner's additional direction from nearest town or intersection): If at owner's additional direction from nearest town or intersection): If at owner's additional direction from nearest town or intersection): If at owner's additional direction from nearest town or intersection): If at owner's additional direction from nearest town or intersection): If at owner's additional direction from nearest town or intersection is additional direction from nearest town or intersection direction from nearest town or intersection direction from nearest town or intersection direction direction from nearest town or intersection direction direc								o miles and	
Address: Po Box 1806 Address: Address: Po Box 1806									
City: Prad State: 45 ZIP: 67124									
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:							27 004 106		
WITH "X"		4 DEPTH	OF COM	IPLETED WELL:	£	. 5 Latitud	le: 3.1.104402.	(decimal degrees)	
SECTION				Encountered: 1)		Longit	ude: 7.78, 2.0999	(decimal degrees)	
N				3) ft., or 4)				1 □ NAD 83 □ NAD 27	
		WELL'S STATIC WATER LEVEL: 3 €				Source for Latitude/Longitude: GPS (unit make/model:)			
NW	NIE			, measured on (mo-day	- ,				
Nw	NE	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map			
w 	X E	after hours pumping gpm				Ponline Mapper Google Earth			
OW.		• Well water was ft.			4				
SW	- SE	after hours pumping gpm				6 Flourst	am. A	□ Ground Lavel □ TOC	
		Estimated Yield: .: \(\O_\)gpm Bore Hole Diameter: .\(\O_\).\(\O_\)ft.				6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map			
					_	Other			
	Thin to the total state of the t								
7 WELL WATER TO BE USED AS:									
1. Domestic:	ıd		☐ Public Water Supply: well ID						
				ig: how many wells?. echarge: well ID		11. Test He	☐ Cased ☐ Uncased ☐ Geotechnical		
				g: well ID		12 Geothe	12. Geothermal: how many bores?		
2. Irrigation					iation: well ID				
3. ☐ Feedlot ☐ Air Sparg				oil Vapor Extraction b) Open Loop Surface Discharge Inj. of W					
4. Industrial Recovery					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 PPVC Other									
Casing diameter									
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 LCO ft. to									
GRAVEL PACK INTERVALS: From35 ft. to80 ft., From ft. to ft., From ft. to ft.									
9 GROUT MATERIAL: Neat cement Cement grout DeBentonite Other									
Grout Intervals: From									
Nearest source of possible contamination:									
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage ☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well									
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well									
Other (Specify)									
Direction from well?									
10 FROM	TO		LITHOLO		FROM	ТО	LITHO. LOG (cont.) o	r PLUGGING INTERVALS	
0	4		y Top S						
i i	34	Tan (ا ۱۰۰۱						
34	80		andson	d					
					Notes:				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Sconstructed, are 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 but	siness nam	ie of Lice	CU. CIRC	atex well Sex	Vice	Signature	Mar Ila		
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.									
Visit us at http://www.kdheks.gov/waterweil/index.html KSA 82a-1212 Revised 7/10/2015									