WATER WELL R		Form WWC			ision of Water	•			
Original Record		Change in We			ources App. No		Well ID		
1 LOCATION OF WATER WELL: Fraction County: SEDGWICK Fraction NW1/4 NW1/4 SE 1/4				Section Number   Township Number   Range Number   T 25 S   R 3 $\square$ E $\blacksquare$ W					
2 WELL OWNER: Last Name: MCCURRY First: GREG Street or Rural Address where well is located (if unknown, distance)								, distance and	
Business: direction from nearest town or intersection): If at owner's address, check here:									
Address: 11811 N 215TH ST W Address:									
City: SEDGWIC	CK s	tate: KS ZIP:	67135						
3 LOCATE WELL WITH "X" IN	4 DEPTH	OF COMPLET	TED WELL:	20 n	. 5 Latitu	de:		(decimal degrees)	
SECTION BOX:		Depth(s) Groundwater Encountered: 1)				Longitude:(decimal degrees)			
N		ft. 3) ATIC WATER LE				Horizontal Datum: WGS 84 NAD 83 NAD 27			
	below lar	d surface measu	red on (mo-day-	vr) 10/18/2016	Source	Source for Latitude/Longitude:  GPS (unit make/model:)			
NW NE	below land surface, measured on (mo-day-yr). 10/18/2016 above land surface, measured on (mo-day-yr)					(WAAS enabled? ☐ Yes ☐ No)			
	Pump test data: Well water was ft.				☐ Laı	☐ Land Survey ☐ Topographic Map			
W	after	after hours pumping gpm				Online Mapper:			
SW SE	after	Well water was							
	Estimated Yield:15+gpm Bore Hole Diameter:10.5in. to20 ft. and					6 Elevation:ft. Ground Level TOC			
S						Source:			
mile  in. to									
7 WELL WATER TO			nly: well ID		10 🗆 0:1	Field Water Supply: 1	2250		
	. Domestic: 5. ☐ Public Water Supply: well ID					10.  Oil Field Water Supply: lease			
Lawn & Garden						☐ Cased ☐ Uncased ☐ Geotechnical			
☐ Livestock						12. Geothermal: how many bores?			
_	2. Irrigation 9. Environmental Remediation: well ID					a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water			
3. ☐ Feedlot 4. ☐ Industrial			☐ Soil Vapor E	xtraction					
4. ☐ Industrial ☐ Recovery ☐ Injection 13. ☐ Other (specify):									
Was a chemical bacteriological sample submitted to RDHE? The Fes Was not in yes, date sample was submitted.									
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other									
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter fin. to fin. to fin. to fin. to fin. to fin. to SDR-26 Wall thickness or gauge No. SDR-26									
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									
GRAVEL PACK INTERVALS: From									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other.									
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ■ Bentonite ☐ Other									
Nearest source of possible contamination:									
■ Septic Tank									
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well									
☐ Other (Specify) Direction from well? SOUTHWEST Distance from well? 75+  ft.									
								C DETERMINE	
10 FROM TO	OP SOIL	THOLOGIC LO	<del>)</del> G	FROM	TO I	LITHO. LOG (cont.) or	PLUGGIN	JINTERVALS	
	CLAY								
	MED GRAVEL	_							
				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) 10/18/2016 and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No. 884 This Water Well Record was completed on (mo-day-year) 10/25/2016  under the business name of WENINGER DRILLING, LLC. Signature									
Kansas Water Well Con	tractor's Licen	se No. 884	This Wat	er Well Rec	ord was com	pleted on (mo-day-ye	ear) 10/25/	/2016	
Mail I white copy alor	of NYFINING	CLY TABLETIAND	ated well to: Kens	as Denartment	of Health and E	nvironment Rureau of W.	ater GWTC C	Section	
Mail I 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/waterwell/index.html KSA 82a-1212 Revised 7/10/2015									