WATER			Form '	WWC-5		ision of Water	1			
] Correction		ge in Well Use		urces App. No		Well ID		
		ATER WEI	LL:	Fraction	1	tion Number			nge Number	
	: SEDGWI			NW 1/4 SW 1/4 NW 1/4		30	T 26 S		□ E ■ W	
2 WELL OWNER: Last Name: First: 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:										
	DON KLA	USMEYER	CONSTR	RUCTION LLC	direction from	nearest town or i	ntersection): If at owne	r's address,	check here: \square	
Address: 10008 W. YORK ST. 4535 N. RUTGERS ST										
City: WICHITA State: KS ZIP: 67215 MAIZE, KS 67101										
3 LOCATI					70		07.7600	10		
WITH "				MPLETED WELL:		5 Latitud	de: 37.7632	<u></u>	.(decimal degrees)	
	SECTION POV. Deptn(s) Groundwater Encountered: 1)						ude:97.47.	190	.(decimal degrees)	
	2)						Horizontal Datum: WGS 84 NAD 83 NAD 27			
		WELL'S S	TAHC WA	TER LEVEL:	2-14-2024	Source for Latitude/Longitude: GPS (unit make/model: _I-PHONE				
'	k '	Delow	■ below land surface, measured on (mo-day-yr). 2-14-2024 □ above land surface, measured on (mo-day-yr)				S (unit make/model:	TVen III) Va)	
NW	NE		Pump test data: Well water was ft.				(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map			
w - w	- $+$ $ +$ $ +$ $ +$ $ +$ $ +$ $ -$			hours pumping gpm			☐ Online Mapper:			
	Well water was ft.									
SW	SW SE after hours pumping gpm								A Lavel T TOC	
	Estimated Yield:gpm Bore Hole Diameter:12in. to70ft. and						6 Elevation:ft. Ground Level TOC			
	S	Bore Hole				Source: Land Survey PGPS Topographic Map Other				
7 WELL WATER TO BE USED AS: 1. Domestic: 5. \[Public Water Supply: well ID										
1. Domestic:				ater Supply: well ID						
	☐ Household 6. ☐ Dewatering: how many wells?									
	Lawn & Garden 7. Aquifer Recharge: well ID						12. Geothermal: how many bores?			
	☐ Livestock 8. ☐ Monitoring: well ID						a) Closed Loop Horizontal Vertical			
	2. ☐ Irrigation 9. Environmental Remediation: well ID						b) Open Loop Surface Discharge Inj. of Water			
4. \square Industr			Recovery				ner (specify):			
W										
Water well disinfected? ■ Yes □ No 8 TYPE OF CASING USED: □ Steel ■ PVC □ Other										
8 IYPE OF CASHNG USED: Steel PVC Other										
Casing diameter 5 in. to 70 ft., Diameter in. to ft., Diameter in. to 5. Casing height above land surface 12 in. Weight 2.35 lbs./ft. Wall thickness or gauge No. SDR26										
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										
Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)										
SCREEN-PERFORATED INTERVALS: From .50 ft. to .70 ft., From ft., From ft., From ft. to ft.										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From										
Nearest source of possible contamination:										
☐ Septic			Lateral Lin Cess Pool	les ☐ Pit Privy ☐ Sewage L		Livestock Per Fuel Storage	· · · · · · · · · · · · · · · · · · ·	doned Water		
Sewer					agoon _	Fertilizer Storage		ell/Gas Wel		
■ Watertight Sewer Lines										
Other (Specify) Direction from well? NORTH Distance from well? 27'+ ft.										
10 FROM	TO		LITHOLO	GIC LOG	FROM	TO	LITHO. LOG (cont.)	or PLUGGIN	NG INTERVALS	
0	3	TOP SOIL								
3	28	CLAY								
28	45	FINE SAND)							
45	70	MEDIUM S								
1.0										
	<u> </u>				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) 2-14-2024 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 236 This Water Well Record was completed on (mo-day-year) 2-14-2024. under the business name of HARP WELL AND PUMP SERVICE INC Signature TODD.S. HARP.										
Kansas Water Well Contractor's License No. 430. This Water Well Record was completed on (mo-day-year) 430 TODD S HADD										
under the b	ousiness nar	ne of HARP	. <u> </u>	NO POMP SERVIC	<u>г. ЛУ.СS</u>	ignature	LL.S.DART	Water Curre	S 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.										
				is occiz-1307. Man one to	KSA 82a-1	212	no for your records. Tele	Revise	ed 7/10/2015	
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015										