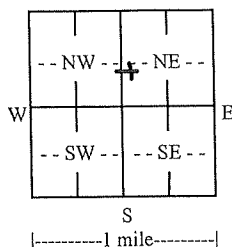


Well ID

<div> <div>Original Record</div> <div>Correction</div> <div>Amendment</div> </div>	<div> <div>Fraction</div> <div>NW ¼ NW ¼ SW ¼ NE ¼</div> </div>	<div> <div>Section Number</div> <div>30</div> </div>	<div> <div>Township Number</div> <div>T 26 S</div> </div>	<div> <div>Range Number</div> <div>R 1 <input type="checkbox"/> E <input checked="" type="checkbox"/> W</div> </div>
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2	WELL OWNER: Last Name: Business: DON KLAUSMEYER CONST Address: 10008 W YORK ST Address: City: WICHITA State: KS	First: ZIP: 67215	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: <input type="checkbox"/> 4360 N RUTGERS CIR MAIZE, KS 67101
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3 LOCATE WELL WITH "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL:70..... ft.

Depth(s) Groundwater Encountered: 1) ft.
2) ft. 3) ft., or 4) ☐ Dry Well

WELL'S STATIC WATER LEVEL:26..... ft.

☒ below land surface, measured on (mo-day-yr).....11-27-24.....
☐ above land surface, measured on (mo-day-yr).....

Pump test data: Well water was ft.
after..... hours pumping gpm
Well water was ft.
after..... hours pumping gpm

Estimated Yield:gpm

Bore Hole Diameter:12..... in. to70..... ft. and
..... in. to ft.

5 **Latitude:**37.76162.....(decimal degrees)
Longitude:-97.47109.....(decimal degrees)
Horizontal Datum: ☒ WGS 84 ☐ NAD 83 ☐ NAD 27
Source for Latitude/Longitude:
☒ GPS (unit make/model: T-PHONE.....)
(WAAS enabled? ☐ Yes ☐ No)
☐ Land Survey ☐ Topographic Map
☐ Online Mapper:

6 Elevation:ft. ☐ Ground Level ☐ TOC
Source: ☐ Land Survey ☒ GPS ☐ Topographic Map
☐ Other

7 WELL WATER TO BE USED AS:

1. Domestic:
☐ Household
☒ Lawn & Garden
☐ Livestock
2. ☐ Irrigation
3. ☐ Feedlot
4. ☐ Industrial
5. ☐ Public Water Supply: well ID
6. ☐ Dewatering: how many wells?
7. ☐ Aquifer Recharge: well ID
8. ☐ Monitoring: well ID
9. Environmental Remediation: well ID
- ☐ Air Sparge ☐ Soil Vapor Extraction
☐ Recovery ☐ Injection
10. ☐ Oil Field Water Supply: lease
11. Test Hole: well ID
- ☐ Cased ☐ Uncased ☐ Geotechnical
12. Geothermal: how many bores?
- a) Closed Loop ☐ Horizontal ☐ Vertical
 b) Open Loop ☐ Surface Discharge ☐ Inj. of Water
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 ☒ PVC ☐ Other CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded
Casing diameter 5 in. to 70 ft., Diameter in. to ft., Diameter in. to ft.
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
☐ 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 50 ft. to 70 ft., From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From 24 ft. to 70 ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other
Grout Intervals: From 4 ft. to 24 ft., From ft. to ft., From ft. to ft.

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
☒ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well
☐ Other (Specify) 15 0

Direction from well? NORTH Distance from well? 15 ft.

[illegible]

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) 11-27-24..... 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) 11-28-24..... under the business name of HARP WELL AND PUMP SERVICE INC..... Signature: TODD S. HARP.....

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/waterwell/index.html>

KSA 82a-1212

Revised 7/10/2015