		RECORD	Form V		D	ivision of Wa	ter					
		Correction		in Well Use		sources App.			Well ID			
		WATER WE	LL:	Fraction		ection Numb	er	Township Numb		ge Number		
	ty: Ford			1/4 NW 1/4 SW 1/4								
	2 WELL OWNER: Last Name: Molitor Business: 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:											
Busines Address		131 Road			direction from	n nearest town o	or inters	section): If at owner	r's address,	check here:		
Address: 11224 131 Road Address: 3 1/4 South, 2 East of Windhorst												
City:	Spearv	lle	State: KS	ZIP: 67876								
3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL:40 ft. 5 Latitude:										/1 : 11 >		
	WITH "X" IN SECTION BOX: Depth(s) Groundwater Encountered: 1)							Longitude: 99.5946 (decimal degrees)				
SECTI	ON BOX:			ft., or 4)		Horiz	zontal i	Datum: WGS 84	1 M NAD	(decimal degrees)		
	WELL'S STATIC WATER LEVEL:							Latitude/Longitude:		BS LI NAD 27		
1	below land surface, measured on (mo-day-yr)11-						GPS (u	mit make/model:	• • • • • • • • • • • • • • • • • • • •)		
NW-	above land surface, measured on (mo-day-yr)						(WAAS enabled? ☐ Yes ☐ No)					
111	Pump test data: Well water was						☐ Land Survey ☐ Topographic Map ☐ Online Mapper:					
W								Mapper:		••••••		
y-SW-	y-SWSE after hours pumping gpm											
1	Estimated Yield:gpm						6 Elevation:ft. Ground Level TOC					
	Bore Hole Diameter:10 in. to 40						Source: Land Survey GPS Topographic Map					
1 mile in. to												
				a Cromples		10 🗆 0	11 101 - 1	d Water Co				
1. Domestic	1. Domestic: 5. ☐ Public Water Supply: well ID ☐ Household 6. ☐ Dewatering: how many wells?							10. ☐ Oil Field Water Supply: lease				
-	Lawn & Garden 7. Aquifer Recharge: well ID						ased	□ Uncased □ G	Geotechnical			
	Livestock 8. Monitoring: well ID						☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?					
2. 🔲 Irriga	2. ☐ Irrigation 9. Environmental Remediation: well ID						losed]	Loop Horizonta	al Verti	cal		
	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extraction							oop Surface Dis	charge	Ini. of Water		
	4. 🗌 Industrial 🔲 Recovery 🖂 Injection 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 fin, to fin, Diameter in to fin, Diameter in to fin, Diameter in to fin, Diameter fi												
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: From30 ft. to10 ft., From ft. to 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 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)	None	• • • • • • • • • • • • • • • • • • • •									
				Distance from we					DY VICE			
10 FROM	TO		ITHOLOGI	C LOG	FROM	TO	LITH	IO. LOG (cont.) or I	PLUGGINO	INTERVALS		
0	3	Top soil										
3	4 24	Brown clay	al amali	ad alaan aaaraa					RECEIVE	-		
24	40	Blue shale	er small m	ed clean coarse				,				
27	-10	Dide stidle						DEC	232	119		
								В	401	110		
						Notes: BUREAU OF WATER						
	SUREAU OF WHEEL											
11 CONT	RACTOR'	S OR LANDO	WNER'S	CERTIFICATION	This water	r well was	con	structed, recon	structed, o	r Dhigged		
under my j	urisdiction a	and was comple	eted on (mo-	day-year)11-25	-1.9 and	this record	is true	to the best of my	knowledge	e and belief.		
Kansas Wa	ter Well Co	ntractor's Lice	nse No!	34 This Wat	er Well Re	cord was cor	nplete	ed on (mo-day-yea	ar) 12-1	1-19		
under the b	usiness nan	ong with a fee of	CCANZ-BE	emis Ent Inc.	or Donortman	gnature	141	ment Pure	OVERO S			
	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												