WATER			Form V					ion of Water					
		Correction						rces App. No			Well ID		
1 LOCATION OF WATER WELL: Fraction							Section Number Township Number Range Number						
County: Gray NE ¼ NE ¼ NE ¼ N WELL OWNER: Last Name: Millershaski First: Ralph Si								22 T 26 S R 29 ☐ E ☑ W ural Address where well is located (if unknown, distance and					
	OWNER: 1	ast Name: Mill	ersnaski	First: R	nqık								
Address: 1710/ 11 Road								irection from nearest town or intersection): If at owner's address, check here: ct. 11 Road & P Road 1/2 mile West.					
Address:							Road	& P Road	1/2 mile	e West.			
City: Ingalls State: Kansazıp: 67853													
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:								5 Latitue	de:	37.7801	1	(decimal degrees)	
	SECTION BOX: Depth(s) Groundwater Encountered: 1) 197						ft. Longitude: 100.47899 (decimal degrees)						
	2) ft. 3) ft., 0						ell	Datum:	: □ WGS	84 🗆 NAI	D 83 ☑	NAD 27	
K		WELL'S STATIC WATER LEVEL:197. ☑ below land surface, measured on (mo-day-yr)					/2017	2017 Source for Latitude/Longitude: GPS (unit make/model:					
1 1 ' 1	' 1	above land surface, measured on (mo-day-yr)											
NW	NE	Pump test data: Well water was					☐ Land Survey ☐ Topographic Map					NO)	
w	- $+$ $ -$	after		ours pumpinggpm				Online Mapper:					
sw	Well water was												
Fetimated Vield:				rs pumping gpm				6 Elevation: 2731ft. ☑ Ground Level ☐ TOC					
	S Bore Hole Diameter:			10 in. to 420 ft. and				Source: Land Survey GPS Topographic Map					
	1 mile in. to								☑ Othe	r KOLAR			
7 WELL V	VATER TO	BE USED	AS:							11-1-1-1-1			
1. Domestic: 5. ☐ Public Water Supply: well ID													
☐ Household 6. ☐ Dewatering: how many wells?													
	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID												
1 —	2. Irrigation S. Monitoring: Well ID. Privation S. Monitoring: Well ID.									Horizon			
3. Feedlo	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex							 b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 					
4. Industr	ial		Recovery		Injection			13. 🔲 Oth	ner (speci	fy):			
Was a cher	mical/bacte	riological saı	nple subm	nitted to	KDHE?	Yes 🔽	No	If yes, date	sample	was submitte	d:		
Water well	disinfected'	Yes 🗆	No										
8 TYPE O	F CASING	USED: 🗆 S	Steel V PV	C Oth	er	C	ASIN	G JOINTS:	☑ Glue	d Clampe	l 🗌 Weld	ed Threaded	
Casing diam	eter	in. to surface	44 ft., 12	Diameter		. in. to		ft., Diame	eter	in. to	f 2-21	t.	
						Ib	s./It.	Wall Inicki	ness or ga	auge No9.0!	\ 		
TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☑ PVC ☐ Other (Specify)													
Brass		vanized Steel				used (ope	n hole)		or (Speen	.,,	•••••		
SCREEN C		ATION OPE					,						
	nuous Slot	Mill Slot								r (Specify)			
Louve	red Shutter	☐ Key Punc	hed □ W	/ire Wrapp	ed □ S	aw Cut		one (Open Ho	ole)	0 5	0 .		
SCREEN-F	EKFOKAT	ED INTERV	ALS: From	n२२५ 24	. it. to . 7.4.9.	IL., F	rom	It. to	•••••	. It., From	IL. U	to ft.	
A CROUT	MATEDI	AL: Neat	ALS: FIOR	Coment	. IL 10	entonita		11. 10		п., гюн	11. 1	O IL.	
Grout Interv	als. From	4 ft. to	24	ft Fron	1	. ft. to		ft From .		ft. to	ft.	•••••	
		le contaminat	ion:					,					
☐ Septic			Lateral Line	es [☐ Pit Privy			Livestock Per	ns		cide Storag		
Sewer			Cess Pool		☐ Sewage L			uel Storage		_	oned Water		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify)													
Direction from	om well?		· · · · · · · · · · · · · · · · · · ·	Dis	tance from	well?				ft			
10 FROM	ТО		LITHOLO				M					NG INTERVALS	
0		fine sand											
3		brown clay											
25		medium sar										4.00	
160		course sand											
190		ochre shale											
200		shale & sandstone layers sandstone & gray clay layers											
320	420	sandstone &	x gray cia		Note	s :							
11 CONT	RACTOR'	S OR LAND	OWNER'	SCERT	FICATIO	N: This	water	well was 🗸	7 constr	ucted. Trec	onstructed	i, or plugged	
under my i	urisdiction a	nd was comp	leted on (n	no-day-y	ear) .05/.12/	2017	and t	his record is	s true to	the best of m	y knowle	dge and belief.	
Kansas Wa	ter Well Co	ntractor's Lic	ense No.	533	This W	ater Wel	1 Reco	ord was com	apleted o	on (mo-day-y	ear) .05/2	27/2017	
under the business name of Jantzen Water Well													
KS Departr	Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.												
, -		eks.gov/waterwe			. ,							KSA 82a-1212	