| WATER WELL R | | Form WV | | Div | ision of Water | | The state of the s | | |
|--|--|--------------------------------|-----------------|------------------------------|--|--|--|--|--|
| Original Record | | ☐ Change in | | | ources App. No. | | Well ID | | |
| 1 LOCATION OF W | ATER WE | LL: Fra | action | Sec | tion Number | Township Numb | | | |
| County: SOCG | NUICK | | 1/4 NE/1/1W/4 | 5W/4 | 37 | $T \rightarrow Is$ | R DE W | | |
| 2 WELL OWNER: Past Name: First: Street or Rural Address where well is located (if unknown distance and | | | | | | | | | |
| Business: Klauber Arthory direction from nearest town or intersection): If at owner's address, check here: | | | | | | | | | |
| Address: 10042 W Lydia Ct 10042 W Lydia Cf City: Wichta State: KS ZIP: 67309 Wichta, KS 67009 | | | | | | | | | |
| City: 12)26h | ita | State: KS Z | IP: 1072191 | | WICK | ita KS | 67201 | | |
| 3 LOCATE WELL | - T | • | | | | * | | | |
| WITH "X" IN | 4 DEPTI | 1 OF COMPL | ETED WELL: | 1 ft | 5 Latitud | | (decimal degrees) | | |
| SECTION BOX: | | | ountered: 1) | Longitude: (decimal degrees) | | | | | |
| N | 2) ft. 3) ft., or 4) [1] I WELL'S STATIC WATER LEVEL: | | | | | □ WGS 84 □ NA | | | |
| | below land surface, measured on (mo-day-yr) | | | | | Source for Latitude/Longitude: GPS (unit make/model:) | | | |
| NWNE | above land surface, measured on (mo-day-y | | | | | (WAAS enabled? | | | |
| | Pump test data: Well water was ft. | | | | | d Survey Topogr | | | |
| W X E | | | | | pm | | | | |
| SW SE | -0 | | was ft | | | | | | |
| | after hours pumping gp Estimated Yield: | | | | 6 Elevation | on' fi | Ground Level D TOC | | |
| S | | | | | | 6 Elevation:ft. ☐ Ground Level ☐ TOC a. and Source: ☐ Land Survey ☐ GPS ☐ Topographic Map | | | |
| 1 mile | Bote Hote | | in. to | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | |
| 1. Domestic: | | | Supply: well ID | | 10. □ Oil F | Field Water Supply: 16 | ease | | |
| Household 6. Dewatering: how many wells? | | | | | 11. Test Hole: well ID | | | | |
| Lawn & Garden | Lawn & Garden 7. Aquifer Recharge: well ID | | | | | | | | |
| ☐ Livestock 8. ☐ Monitoring: well ID | | | | | | | | | |
| 2. Irrigation 9. Environmental Remediation: well ID | | | | | , 1 — — — — — — — — — — — — — — — — — — | | | | |
| 3. Feedlot Air Sparge Soil Vapor Ex 4. Industrial Recovery Injection | | | | xtraction | b) Open Loop Surface Discharge Inj. of Water | | | | |
| | | | | | | | | | |
| Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted: | | | | | | | | | |
| Water well disinfected? | | | | | | | | | |
| 8 TYPE OF CASING USED: ☐ Steel ☑ PVC ☐ Other | | | | | | | | | |
| Casing diameter | | | | | | | | | |
| 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 | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | |
| Nearest source of possible Septic Tank | | t ion: Lateral Lines | ☐ Pit Privy | _ | Time at all Down | Г т " | *1 0 | | |
| Sewer Lines | | Cess Pool | ☐ Sewage Lag | | Livestock Pens Fuel Storage | | cide Storage oned Water Well | | |
| Watertight Sewer Li | | Seepage Pit | ☐ Feedyard | | Fertilizer Storage | | ell/Gas Well | | |
| (Specify) | | | | | | | | | |
| Direction from well? | | | | | | | | | |
| 10 FROM TO | | LITHOLOGIC | LOG | FROM | | | r PLUGGING INTERVALS | | |
| | 700 G | Oil | | | | | | | |
| 1 18 | Chy | | | | | | | | |
| 18 85 | Fine | Sayd. | | | | | | | |
| 85 95 | med | Sand | | | | | | | |
| 95 100 | Fine | Sand | | | | | | | |
| | | | | | | | | | |
| | | | | | Notes: | | | | |
| | | | | | | | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION. This was a second of the s | | | | | | | | | |
| 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) / / and this record is true to the best of my knowledge and belief | | | | | | | | | |
| Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year) | | | | | | | | | |
| under my jurisdiction and was completed on (mo-day-year) (4.30) | | | | | | | | | |
| INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas | | | | | | | | | |
| Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topcka, Kansas 66612-1367. Telephone (785) 296-3565. | | | | | | | | | |
| | neks.gov/waterwel | H/inday html | | KSA 82a-1 | 212 | | Revised 9/10/2012 | | |