					State		
WATER WELL RI			sion of Water				
Original Record LOCATION OF WA			irces App. No.	Township Number	/ell ID Range Number		
County:	CLICK SWYSEY	SS 1/2 NLY	17	T 27 S	R / DE DW		
2 WELL OWNER: Last Name: Of Je 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:							
Address: 9719 1	W 104 St N	direction from Re	earest town or inte	rsection): If at owner's a	ddress, check here:		
Address: City: Wichib State: 15 ZIP: 67212							
3 LOCATE WELL	4 DEPTH OF COMPLETED W		5 Latitude	37.701668	(decimal degrees)		
WITH "X" IN SECTION BOX:	Depth(s) Groundwater Encountered:	1) ft.	Longitud	le:97. 454862	(decimal degrees)		
N	2) ft. 3) ft. WELL'S STATIC WATER LEVEL:		Datum:	WGS 84 NAD 83			
	☐ below land surface, measured on	Source for Latitude/Longitude: GPS (unit make/model:)					
NW NE	above land surface, measured on	above land surface, measured on (mo-day-yr) 5.7-4.5 Pump test data: Well water was			(WAAS enabled? ☐ Yes ☐ No)		
W Y E	after hours pumping			Survey Topographi e Manner:	с Мар		
SW SE	Well water was						
	after hours pumping Estimated Yield: .2.0.+gpm	•			Ground Level TOC		
S mile	Bore Hole Diameter: .1.2 in. to .	ft. and] Land Survey	☐ Topographic Map		
1 mile in. to ft. Other							
1. Domestic:	Public Water Supply: w			eld Water Supply: lease			
☐ Household MLawn & Garden	6. ☐ Dewatering: how many7. ☐ Aquifer Recharge: well			e: well ID			
Livestock	8. Monitoring: well ID	12. Geothermal: how many bores?					
2. Trrigation 3. Feedlot	9. Environmental Remediation ☐ Air Sparge ☐ Soi	n: well IDil Vapor Extraction		d Loop ☐ Horizontal Loop ☐ Surface Disch			
4. Industrial	Recovery Injection	-		(specify):			
Was a chemical/bacteriological sample submitted to KDHE? Yes SkNo If yes, date sample was submitted:							
Water well disinfected? Syres ☐ No 8 TYPE OF CASING USED: ☐ Steel Steel Steel Steel Other							
Casing diameter							
Casing height above land surface							
TYPE OF SCREEN OR PERFORATION MATERIAL: □ Steel □ Steel □ Fiberglass □ Other (Specify)							
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE: Continuous Slot Gmill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)							
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)							
SCREEN-PERFORATED INTERVALS: From							
9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other							
Grout Intervals: From							
Nearest source of possible Septic Tank		it Privy	Livestock Pens	☐ Insecticide	Storage		
Sewer Lines	<u> </u>	_	Fuel Storage	☐ Abandone			
Watertight Sewer Lin		eedyard 🔲	Fertilizer Storag	e	Jas Well		
Direction from well?	Distance	ce from well?			Washis namenuita		
10 FROM TO 2	LITHOLOGIC LOG	FROM	TO LI	THO. LOG (cont.) or Pl	LUGGING INTERVALS		
2 24	Class						
24 60	med Sand						
		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) .5.1.5 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Ligense No							
under the business name	e of	Intelling q			• • • • • • • • • • • • • • • • • • • •		
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, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.							
•	ncks.gov/waterwell/index.html	KSA 82a-12		•	Revised 9/10/2012		