	R WELL R		Form '				ision of Wate			ĺ			
	l Record			ge in Well Use		Resc	urces App. N	lo. 1		Well ID			
1 LOCATION OF WATER WELL: Fraction						Section Number Township Number Range Number							
Count	y: SEDGWI		SW¼ 18 T 27 S R 1 □ E ■ W										
2 WELL OWNER: Last Name: CARTER First: JOHN Street or Rural Address where well is located (if unknown, distance and													
Business: direction from nearest town or intersection): If at owner's address, check here:													
Address: 11327 W BEKEMEYER Address:													
City: WICHITA State: KS ZIP: 67212													
3 LOCAT		T				115 0	Τ		Luniview La				
WITH "				IPLETED WELL									
SECTIO	SECTION BOX: Depth(s) Groundwater Encountered: 1)							Longitude:					
WELL'S STATIC WATER LEVEL:35 ft									Latitude/Longitude		83 LI NAD 27		
below land surface, measured on (mo-day-y							GPS (unit make/model:)						
NW	NE	☐ above l	☐ above land surface, measured on (mo-day-yr)				(WAAS enabled? ☐ Yes ☐ No)						
			vater was		ft.								
W	E after hours pumping gpm							☐ Online Mapper:					
swX-	Well water was ft. after												
		Fstimated V	Estimated Yield: 10+ grm				6 Elevation:ft. Ground Level TOC						
<u> </u>	S	Estimated Yield:10+gpm Bore Hole Diameter:10.5in. to115			ft. and	ft. and Source: Land Survey GPS Topographic							
1 1	1 mile in. to ft.								☐ Other				
7 WELL WATER TO BE USED AS:													
1. Domestic				ter Supply: well ID					ld Water Supply: le				
, —	Household 6. ☐ Dewatering: how many wells?						11. Test Hole: well ID						
, –	■ Lawn & Garden 7. ☐ Aquifer Recharge: well ID								☐ Uncased ☐ (
1 —	Livestock 8. Monitoring: well ID								al: how many bores				
2. ☐ Imgar 3. ☐ Feedlo	☐ Irrigation 9. Environmental Remediation: well ID						 a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 						
	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vap. 4. ☐ Industrial ☐ Recovery ☐ Injection												
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 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 95 ft. to .115 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													
Septic			ion; Lateral Line	s 🔲 Pit Privy	L7	П	Livestock Pe	ne	□ Insecti	cide Storage			
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage ☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well													
■ Watertight Sewer Lines													
Other (Specify)													
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			Distance from	well				ft.				
10 FROM	TO		ITHOLOG	GIC LOG		FROM	TO	LIT	HO, LOG (cont.) or	PLUGGIN	G INTERVALS		
0		OP SOIL											
1		CLAY			$\longrightarrow$								
18		INE SAND		,					<del></del>				
20		MED GRAVE											
40		MED SAND	RLACK										
50		CLAY											
98	120 N	MED GRAVEL Notes:											
11 CONTRACTORIS OR LANDONAMENTS OF THOSE MICE.													
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) .08/30/20.16 and this record is true to the best of my knowledge and belief.													
Kansas Water Well Contractor's License No. 884 This Water Well Record was completed on tho-day-year) 09/03/2016													
under the business name of WENINGER DRILLING, LLC Signature													
under the business name of WENINGER DRILLING. LLC.  Mail I 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 S	., Suite 420, Top	peka, Kansas	66612-1367. Mail one	to W	ater Well Own	er and retain o	ne fo	r your records. Teleph	none 785-296	-5524.		
	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												