WATER WELL R		Form W			ision of Water				
Original Record					ources App. No.	[# 1: N 1	Well ID	NII	
1 LOCATION OF WATER WELL: Fraction County: SEDGWICK NW¼ NE¼ NW¼					Section Number Township Number Range Number Yange Number Township Number Range Number				
2 WELL OWNER: Last Name: LIVINGSTON First: MATTHEW Street or Rural Address where well is located (if unknown, distance and									
Business: MOBILE SERVICES, INC Address: 5725 W 23RD ST N Address:									
City: WICHITA		State: KS	ZIP: 67205				,		
3 LOCATE WELL WITH "Y" IN	WITH "V" IN 4 DEPTH OF COMPLETED WELL:99					5 Latitude:(decimal degrees)			
SECTION BOX:	SECTION ROY. Depth(s) Groundwater Encountered: 1) tt.					Longitude:(decimal degrees)			
N	2)					Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27 Source for Latitude/Longitude:			
	below land surface, measured on (mo-day-yr).12/22/201					GPS (unit make/model:)			
NW NE	above land surface, measured on (mo-day-yr)					(WAAS enabled? ☐ Yes ☐ No)			
	Pump test data: Well water was					☐ Land Survey ☐ Topographic Map			
W	after hours pumping gpm Well water was ft.				Onli	Online Mapper:			
SW SE		after hours pumping gpm							
	Estimated Yield:10+gpm Bore Hole Diameter:10.5 in. to60 ft. and				6 Elevation:				
S mile	Bore Hole I		in. to			Other			
7 WELL WATER TO BE USED AS:									
1. Domestic:			r Supply: well ID		10. 🔲 Oil Fi	eld Water Supply: le	ase	*******	
☐ Household 6. ☐ Dewatering: how many wells?					11. Test Hole: well ID				
■ Lawn & Garden 7. ☐ Aquifer Recharge: well ID						☐ Cased ☐ Uncased ☐ Geotechnical			
☐ Livestock 2. ☐ Irrigation 8. ☐ Monitoring: well ID						12. Geothermal: how many bores?			
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex					b) Open Loop Surface Discharge Inj. 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									
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter 5 in to 60 ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 12 in Weight Wall thickness or gauge No. SDR-26									
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 .26 ft. to .56 ft., From									
GRAVEL PACK INTERVALS: From									
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other									
Nearest source of possible contamination:									
■ Septic Tank									
☐ 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)									
☐ Other (Specify) Direction from well? NORTH Distance from well? 75+ ft.									
10 FROM TO	L	ITHOLOGI		FROM		THO. LOG (cont.) or	PLUGGIN	G INTERVALS	
	OP SOIL								
	LAY MED GRAVE	=		+					
	HALE	<u>- L</u>	· · · · · · · · · · · · · · · · · · ·	+					
				-					
						The state of the s			
				Notes:					
11 CONTRACTORS OF LANDOWNERS CERTIFICATION. This was all the second of t									
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) 12/22/2016 and this record is true to the best of my knowledge and belief									
under my jurisdiction and was completed on (mo-day-year) .12/22/2016 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 884									
under the business name	of WENIN	GER DRILL	ING. LLC	Sig	natura				
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 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									