	WELL R		Form '		Divi	ision of Water				
Original	Record _	Correction	☐ Chang	ge in Well Use		urces App. No.		Well ID		
1 LOCATION OF WATER WELL: Fraction						tion Number Township Number Range Number				
County: SEDWICK Sedewick SW4 NE 4 NW 4 NE 4 16 T 27 S R 1 DE W  WELL OWNER: Last Name: HARKINS First: GABE Street or Rural Address where well is located (if unknown, distance and										
	OWNER: L	ast Name: 44A	RKINS							
Business: Address: 1335 NORTH WILBUR LANE										
Address:										
City:	<b>WICHITA</b>		State: KS	ZIP: 67212						
3 LOCAT		4 DEPTE	I OF CON	APLETED WELL: .	60 ft.	5 Latitud	e:		(decimal degrees)	
	WITH "X" IN SECTION BOX: Depth(s) Groundwater Encountered: 1)						,			
1	N 2) ft. 3) ft., or 4)						tal Datum: WGS 8	4 □ NAD	83  NAD 27	
WELL'S STATIC WATER LEVEL:24.  ■ below land surface, measured on (mo-day-yr							or Latitude/Longitude			
'	1	below	land surface	, measured on (mo-day-	yr)	☐ GPS	(unit make/model:			
NW	NE	□ above land surface, measured on (mo-day-yr)  Pump test data: Well water was				1	(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map			
w <del>y</del>	E	after hours pumping gpm				Online Mapper:				
'C.	Well water was ft.									
SW	after hours pumping					6 Flevetic	an· A	☐ Ground	TOC level I	
		Estimated	Estimated Yield:20gpm Bore Hole Diameter:10.5 in. to60 ft			6 Elevation:ft. Ground Level TOC Source: Land Survey GPS Topographic Map				
1 n	S nilel	Bore Hole	in. tof			Other				
7 WELL WATER TO BE USED AS:										
1. Domestic: 5. Public Water Supply: well ID										
	☐ Household 6. ☐ Dewatering: how many wells?						11. Test Hole: well ID			
Lawn &	■ Lawn & Garden 7. ☐ Aquifer Recharge: well ID					. Cased Uncased Geotechnical				
	Livestock 8. Monitoring: well ID					12. Geothermal: how many bores?				
	2. ☐ Irrigation 9. Environmental Remediation: well ID 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extra					a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
3. ☐ Feedlor 4. ☐ Industr			Recovery		extraction					
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 5 in to 60 ft Diameter in to ft Diameter in to ft										
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)										
SCREEN-PERFORATED INTERVALS: From .45 ft. to .60 ft., From ft. to ft. ft.										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From										
Nearest source of possible contamination:										
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage										
■ Sewer Lines □ Cess Pool □ Sewage Lagoon □ Fuel Storage □ Abandoned Water Well □ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well										
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify)										
Direction from well? SOUTH WEST Distance from well? .75.+ ft.										
10 FROM	TO		LITHOLO		FROM		ITHO. LOG (cont.) o		G INTERVALS	
0	1	TOP SOIL								
1		CLAY								
25		MED GRAV	/EL/RED							
34		CLAY								
36	60	MED GRAV	/EL				· · · · · · · · · · · · · · · · · · ·			
					1					
					Notes:					
					-					
11.00	D A COTO TO	ODIAN	OHAIRE	COPPONE	J. This seed	11 ==			[]-1	
11 CONT	KACTOR'S	ok LAND	Jeted on (-	S CERTIFICATION no-day-year) .5/21/2	i: Inis wate	r well was	constructed, rec	onstructed,	or plugged	
Kansas Wa	uter Well Co	ntractor's Lie	cense No.	884 This Wa	ater Well Rec	cord was com	oleted on (mo-day-v	(ear) 6/18/	2018	
under the b	usiness nam	e of .WENU	NGER.DR	BILLING LLC	Si	gnature	HA KEJYKPOWSKA			
Mail 1 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 htt	p://www.kdhek	s.gov/waterwell	/index.html		KSA 82a-12	.12		Revise	d 7/10/2015	