WATER			Form V				sion of Water] ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		Correction ATER WEL		Fraction			urces App. No ion Number		Well ID	nge Number	
	SEDGWI		ılı:	NW 1/4 SW 1/4 N'	W 1/4 N	1	2	T 27 S		I □ E ■ W	
2 WELL OWNER: Last Name: First: Street or Rural Addr								ss where well is located (if unknown, distance and or intersection): If at owner's address, check here:			
WITH "2 SECTION NO SEC	OCATE WELL TTH "X" IN ECTION BOX: N 4 DEPTH OF COMPLETED WELL:						5 Latitude: 37.73528 (decimal degrees) Longitude: -97.40739 (decimal degrees) Horizontal Datum: ■ WGS 84 □ NAD 83 □ NAD 27 Source for Latitude/Longitude: ■ GPS (unit make/model: I-PHONE (WAAS enabled? □ Yes □ No) □ Land Survey □ Topographic Map □ Online Mapper: 6 Elevation:				
1 m				in. to		ft.		Other			
1. Domestic: Housel Lawn &	☐ Household 6. ☐ Dewatering: how many wells? ☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID ☐ Livestock 8. ☐ Monitoring: well ID ☐ Irrigation 9. Environmental Remediation: well ID ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extraction						10. ☐ Oil Field Water Supply: lease				
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 JOINTS: Glued Clamped Welded Threaded Casing diameter 5 in to 40 ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 12 in Weight 2:35 lbs./ft. Wall thickness or gauge No. SDR26 TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Stainless Steel Fiberglass PVC Other (Specify) Steel Galvanized Steel Oncrete 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 30 ft. to 40 ft., From ft. to ft., From ft. to ft.											
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other ☐ Cout Intervals: From											
Nearest source of possible contamination: Septic Tank											
		TOP SOIL		OIC LOG		1 10101	10			. SITTER TIES	
3		CLAY									
10	22	FINE SAND									
22	40	MEDIUM SA	AND								
	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) .10-1.7-2023 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 236 This Water Well Record was completed on (mo-day-year) .10-18-2023 under the business name of HARP WELL AND PUMP SERVICE, INC. Signature											
Mail 1 white copy along with a ree of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of water, Gw 15 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-12										