WATER WELL RI Original Record		Form V				oivision of Water esources App. No		Well ID Stock		
1 LOCATION OF W			Fractio	····	Se	ction Number	r Township Numb	per Range Number		
County: Kiowa NE ¼ NE ¼ NW 3					4 NW ¼ 17 T 27 S R 16 □ E 🖾 W					
2 WELL OWNER: L	_ First: Ja	acob	Street or Rural Address where well is located (if unknown, distance and							
Business: Address: 2949 S Rd.					direction from nearest town or intersection): If at owner's address, check here: Approximately 5 miles north of Haviland.					
Address:	Address:						ripproximatory of miles not in or riterinante.			
City: Haviland		State: KS	ZIP: 6	7059						
3 LOCATE WELL WITH "X" IN	4 DEPTH	OF COM	PLETE	D WELL:	. 79 f	t. 5 Latitu	de: 37.702396	(decimal degrees)		
SECTION BOX:	Depth(s) Gr	oundwater	Encount	ered: 1)	ft.	Longit	Longitude: -99.101561 (decimal degrees) Horizontal Datum. □ WGS 84 □ NAD 83 ☑ NAD 27			
N	WELL'S ST	tt. 3 ATIC WA') FER LEV	ft., or 4) [VEL: 52.3	∐Dry Well					
X	below land surface, measured on (mo-day- above land surface, measured on (mo-day- pump test data: Well water was not checked f after hours pumping					-	for Latitude/Longitude PS (unit make/model:	<u>:</u>		
NWNE								(WAAS enabled? ☑ Yes ☐ No) Survey ☐ Topographic Map		
W										
SW CE								fapper:		
SWSE	after hours pumping gp				gpm	6 Elevation: Unknown ft. Ground Level TOC				
	Estimated Yield: gpm									
S mile	Bore Hole Diameter: 9 in. to 80 in. to					Source	Source: Land Survey GPS Topographic Map Other			
7 WELL WATER TO BE USED AS:										
1. Domestic:							10. Oil Field Water Supply: lease			
Household										
☐ Lawn & Garden X Livestock	7. Aquifer Recharge: well ID									
2. Irrigation	9. Environmental Remediation: well II									
3. Feedlot						b) Op	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 CASING JOINTS: Glued Clamped Welded Threaded Other Casing diameter 5 in. to 57 ft., Diameter in. to ft., Diameter in. to ft.										
Casing height above land surface 24 in. Weight 2.36 lbs./ft. Wall thickness or gauge No. 214										
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 57 ft. to 77 ft., From ft. to ft., From ft. to ft.										
GRAVEL PACK INTERVALS: From 20 ft. to 80 ft., From ft. to ft., From ft. to ft. From ft. to ft.										
Grout Intervals: From 0 ft. to 20 ft., From ft. to ft., From ft. to ft.										
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										
Other (Specify) None Known										
	·			stance from well		ft.				
10 FROM TO 15	I Sand	ITHOLOG	iic Loc	j	FROM	ТО	LITHO. LOG (cont.) o	r PLUGGING INTERVALS		
	Sand Clay, tan, sandy	· · · · · · · · · · · · · · · · · · ·			1					
	Clay, brown, tan				 					
	Sand & gravel, fine to coarse									
78 80	Clay, tan, caliche									
					NT 4					
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) 12-14-17 and this record is true to the best of my knowledge and belief.										
Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo-day-year) 12-19-17 under the business name of Clarke Well & Equipment, Inc.										
Mail 1 white copy al	ong with a fee of	\$5.00 for <u>eac</u>	h constru	cted well to: Kar	sas Departmen	t of Health and E	Environment, Bureau of W	ater, 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.izov/waterwell/index.html KSA 82a-1212								Revised 7/10/2015		