WATER WELL RE Original Record		Form WW			sion of Water		Well ID	
1 LOCATION OF WA		Frac	tion	s Sect	urces App. No.	Township Numb		
County: Stagn		1140	145E1/10W1/48	in	36	T 2 7 S	$R \supset \Box E \boxtimes W$	
2 WELL OWNER: East Name: First: Street or Rural Address where well is located (if unknown, distance and								
Business: Thi - M Construction CD direction from nearest town or intersection): If at owner's address, check here:								
Address: 760181039 StE 2104 Swelsh St								
City: Derby	4	State:\S ZIP	67037		<u> </u>	Shi Ta, K	S 47230	
3 LOCATE WELL	4 DEPTH	OF COMPLE	TED WELL:	1.2 ft.	5 Latitud	e·	(decimal degrees)	
WITH "X" IN SECTION BOX:	Depth(s) Gro	oundwater Encou	ntered: 1)	ft.			(decimal degrees)	
N N	2)	ft. 3)	ft., or, 4)	Dry Well Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27				
	WELL'S STATIC WATER LEVEL:				6.34.14			
NW NE					☐ GPS (unit make/model: (WAAS enabled? ☐ Yes ☐ No)			
IN W INE	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map			
W E	after		oingg		Online Mapper:			
	Well water was							
	Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC			
S	Bore Hole Diameter: in. to f				Source: Land Survey GPS Topographic Map			
1 mile			in. to	. ft.		Other		
7 WELL WATER TO BE USED AS:								
1. Domestic: [].Household			pply: well ID				ease	
Lawn & Garden	6. ☐ Dewatering: how many wells? 7. ☐ Aquifer Recharge: well ID				11. Test Hole: well ID			
Livestock	8. Monitoring: well ID				12. Geothermal: how many bores?			
2. Irrigation			nediation: well ID		a) Closed Loop			
3. Feedlot		Air Sparge	Soil Vapor E	xtraction			ischarge Inj. of Water	
4. Industrial		Recovery	☐ Injection			• • /	1	
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:								
water well districted? No CASING IOINTS: Vi Chad II Clamad II Wolded II Threeded								
8 TYPE OF CASING USED: Steel DIPVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in. to ft., Diameter in. to ft., Diameter ft.								
Casing height above land surface								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)								
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								
GRAVEL PACK INTERVALS: From								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
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)								
Direction from well? Distance from well? It.								
10 FROM TO	I	ITHOĻOGIC L		FROM			or PLUGGING INTERVALS	
01	7005	10 I					A CONTRACTOR OF THE CONTRACTOR	
	Char	1						
11 45	Shæ	1. /						
65 72	-XXP	OCX_					MANAGE TO THE STATE OF THE STAT	
				Notes:	L			
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)								
Kansas Water Well Contractor's Lidense No. 3.5.7 This Water Well Record was completed on (mo-day-year) 30.1.4 under the business name of								
under the business name	of	eniñola.	DAMILACA	1. L.C.	ŢŶŹĹ	MS.COJ.CO	R	
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for you records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.								
Department of Hea Visit us at http://www.kdhe			Geology Section, 1000	SW Jackson St., S KSA 82a-12		Kansas 00012-1367. Telepi	Revised 9/10/2012	