WATER WELL I		WWC-5	Div	ision of Water				
Original Record		ge in Well Use		urces App. No		Well ID		
1 LOCATION OF V		Fraction		tion Number	Township Numb			
County: SEDGW	NW 1/4							
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: Address:						r's address, check here:		
Address: 14506 EAST MAPLE GROVE ROAD City: MT.HOPE State: KS ZIP: 67108			18701 WEST 29TH STREET NORTH, COLWICH, KS					
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL: 100ft. 5 Latitude:								
WITH "X" IN	SECTION BOX: Depth(s) Groundwater Encountered: 1)					Longitude:(decimal degrees)		
N SECTION BOX.	2) ft.	2)				4 □ NAD 83 □ NAD 27		
	WELL'S STATIC WATER LEVEL:							
NW NE		e, measured on (mo-day-		□ GP	☐ GPS (unit make/model:			
NW NE	Pump test data: Well water was				☐ Land Survey ☐ Topographic Map			
WE		after hours pumping gpm Well water was ft.			☐ Online Mapper:			
SW SE	Well after hou			4. A.	****			
	Estimated Vield: 20			6 Elevation:ft. ☐ Ground Level ☐ TOC				
S	Bore Hole Diameter:	ft. and	Source:	Source: Land Survey GPS Topographic Map				
mile in. to ft. Uther								
7 WELL WATER TO BE USED AS:								
1. Domestic: ☐ Household		ater Supply: well ID ing: how many wells?			10. Oil Field Water Supply: lease			
Lawn & Garden		Recharge: well ID		☐ Cased ☐ Uncased ☐ Geotechnical				
Livestock	8. 🗌 Monitori					12. Geothermal: how many bores?		
2. Irrigation	9. Environmen		a) Closed Loop Horizontal Vertical					
3. ☐ Feedlot 4. ☐ Industrial					b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):			
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:								
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other								
Casing diameter								
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)								
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)								
SCREEN-PERFORATED INTERVALS: From .40								
GRAVEL PACK INTERVALS: From 23 ft. to 100 ft., From ft. to ft., From ft. to ft.								
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) ☐ Other (Specify)								
Direction from well?								
10 FROM TO		OGIC LOG	FROM	TO I	JTHO. LOG (cont.) or	r PLUGGING INTERVALS		
	TOP SOIL CLAY							
	AQUA SHALE							
	GRAY SHALE		+					
100	O. U. I. OIWILL					,		
			Notes:					
11 CONTRACTORIS OR LANDOWNERS CERTIFICATION. THE								
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) .4/13/2018 and this record is true to the best of my knowledge and belief.								
Kansas Water Well Co	ontractor's License No.	.884 This Wa	iter Well Rec	ord was com	pleted on (mo-day-y	ear) .(/9/2018		
under the business nam	ne of WENINGER DI	RILLING LLC	Siş	gnature	HA KRYKPOWSKA			
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 http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015								