WATER				sion of Water		T					
			nge in Well		urces App. N						
1 LOCATION OF WATER WELL: Use Fraction					Section Number Township Number Range Number						
	Sedgwic		SE 4SE 4SW 4								
2 WELL OWNER: Last Name MYERS First Jaret 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:											
Business: Address 2	25 S. M	aple Dunes Ct.		direction from i	learest town or	intersection): If at ow	ner's auc	H688, C	neck nete.		
Address											
City: 7	<i>l</i> ichita	State: Kar	sas ZIP. 67235								
3 LOCATE		4 DEPTH OF CO	0 п	ft. 5 Latitude: 37. 67948							
	WITH "X" IN SECTION BOX:  Depth(s) Groundwater Encountered: 1)										
2) ft. 3) ft., or 4)					Ory Well Horizontal Datum: ■ WGS 84 □ NAD 83 □ NAD 27						
	WELL'S STATIC WA	ft.	Source	for Latitude/Longitu	de:						
	1	below land surfac	10/01/21								
NW	above land surface, measured on (mo-day-				(WAAS enabled? ☐ Yes ☐ No)						
	Pump test data: Well water wasft  after hours pumping				☐ Land Survey ☐ Topographic Map ☐ Online Mapper:						
W	Well water was			;piii		nine Mapper:	•••••	• • • • • • • • • • • • • • • • • • • •	•••••		
sw	SE	1	after hours pumping gpr								
×		Estimated Yield:	Estimated Yield:gpm			6 Elevation:					
s			12 in. to 7.9	Source	Source:   Land Survey  GPS Topographic Map  Other						
1 m	· · · · · · · · · · · · · · · · · · ·		in. to	ft.		Uther		• • • • • • • • • • • • • • • • • • • •	•••••		
7 WELL WATER TO BE USED AS:											
1. Domestic:       5. □ Public Water Supply: well ID						•••••	•••••				
Lawn &		7. ☐ Aquifer									
Livesto											
2. Irrigation											
	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex					b) Open Loop  Surface Discharge  Inj. of Water					
4. Industr	al	☐ Recover		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 ☐ Other											
Casing diameter 5											
Casing height above land surface											
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 50 ft. to 70 ft., From ft. to ft., From ft. ft. to ft.											
GRAVEL PACK INTERVALS: From 24 ft. to 70 ft., From ft. to ft., From ft., From ft. to ft.											
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other											
Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft.											
Nearest source of possible contamination:   □ Septic Tank □ Lateral Lines □ Pit Privy □ Livestock Pens □ Insecticide Storage											
☐ Septic 7		☐ Lateral L ☐ Cess Poo			Livestock Pe Fuel Storage		ecticide andoned				
					Fertilizer Sto						
Watertight Sewer Lines											
Direction fro	m well?No	cth	Distance from wel	1? <b>7.0£t</b>	plus						
10 FROM	TO	LITHOL	OGIC LOG	FROM	TO	LITHO. LOG (con	.) or PL	UGGIN	G INTERVALS		
		topsoil									
		clay									
		fine sand									
		medium sand grav shale									
	,,	Ard Sugre									
				NT-4							
				Notes:				عدر ا			
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) 10/01/2021, and this record is true to the best of my knowledge and belief.											
Kansas Water Well Contractor's License No236 This Water Well Record was completed on (mo-day-year) 10.74.2021											
under the business name of Harp Well and Pump Service Signature Jadd S. Harp  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,											
Mail 1 w	hite copy alor	g with a fee of \$5.00 for ea	ch constructed well to: Kans	as Department	of Health and E	nvironment, Bureau of	Water, G	WTS St	ection,		
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											
Visit us at http.//www.kdheks.gov/waterwell/index html KSA 82a-1212 Revised 7/10/2015											