	WELL R		Form '	WWC-5			sion of Wate	- 1					
Original	Record	Correction	☐ Chang	ge in Well Use		Resou	ırces App. N			Well ID			
1 LOCATION OF WATER WELL: Fracti						Section Number			Township Number   Range Number				
County: SEDGWICK NE 1/4 SW 1/4 SE 1/4													
2 WELL OWNER: Last Name: TARBELL First: SEAN Street or Rural Address where well is located (if unknown, distance and											distance and		
Business:	0 1111222					direction from n	earest town or	inter	section): If at owner's	address, o	check here: 🔳		
Address:	Address: 15300 W. TALOPA CIR.												
Address:													
City:	GODDAR	D	State: KS	ZIP: 67052									
3 LOCATI	E WELL	4 DEDTI	LOE CON	ADI ETED XX	TOT T.	110 в	F T -444		37 68742		(1!1 1)		
3 LOCATE WELL WITH "X" IN Depth(s) Groundwater Encountered: 1)											(decimal degrees)		
SECTIO	N BOX:	Depth(s) G	roundwater	Encountered: 1	(.	II.							
N	2)								Datum: WGS 84	∟ NAD	83 LI NAD 27		
Г	well's Static water level:							for	Latitude/Longitude:	HONE	`		
NW								(WAAS enabled? ☐ Yes ☐ No)					
	Pump test data: Well water was							☐ Land Survey ☐ Topographic Map					
W	Е	E after hours pumping gpm Well water was ft.							☐ Online Mapper:				
SW	SE												
	atter nours pumping gpm							tion	:ft. [	7 Ground	Level 🗌 TOC		
	Estimated Yield:gpm						Source: Land Survey GPS Topographic Map						
	Bore Hole Diameter:							Other					
Time-													
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID													
1. Domestic:													
	Household 6. ☐ Dewatering: how many wells?												
	Lawn & Garden 7. Aquifer Recharge: well ID							☐ Cased ☐ Uncased ☐ Geotechnical					
	ivestock 8. Monitoring: well ID												
2. 🗌 Irrigati	<b>3</b>								Loop  Horizontal				
3. 🗌 Feedlo			Air Sparg			Extraction			Loop  Surface Discl				
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													
9. TYPE OF CASING USED:     Stock   Proc   Other													
Casing diameter 5 in to 110 ft Diameter in to ft Diameter in to ft													
Casing diameter 5 in. to 110 ft., Diameter in. to ft., Diameter in. to SDR26 Casing height above land surface 12 in. Weight 2.35 lbs/ft. Wall thickness or gauge No. SDR26													
TYPE OF SCREEN OR PERFORATION MATERIAL:													
☐ 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													
SCREEN-PERFORATED INTERVALS: From30													
G	RAVEL PA	CK INTERV	ALS: Fro	m 24 ft. t	to!!	! ft., From .	ft. t	0	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 Lir	nes 🔲 Pi	t Privy		Livestock Po		☐ Insecticio				
☐ Sewer			Cess Pool		ewage La	igoon 🗌	Fuel Storage		☐ Abandon				
■ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well													
Other (Specify) Direction from well? EAST Distance from well? 174'+  ft.													
Direction fr	om well? .E.	<u>\SI</u>		Distanc	e from w	<u>/ell? .1./.4:+</u>			ft.				
10 FROM	TO		LITHOLO	GIC LOG		FROM	TO	LIT	ΓΗΟ. LOG (cont.) or F	LUGGIN	IG INTERVALS		
0	3	TOP SOIL											
3		CLAY											
28	30	FINE SAND	)										
30	90	GRAY SHA									7		
90	100	RED SHAL						<del> </del>			2.0		
100	110	GRAY SHA	LE				<u> </u>	<u> </u>					
						Notes:							
						$\perp$							
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) 4-11-2024 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) 4-13-2024.  under the business name of HARP WELL AND PUMP SERVICE INC. Signature TODD S. HARP.													
under the business name of HARP. WELL AND PUMP SERVICE INC													
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.													
				as 66612-1367. M	1ail one to			one f	or your records. Telepho	ne /85-29	0-0024. 4.7/10/2015		
Visit us at ht	tp://www.kdhe	ks.gov/waterwel	l/index.html			KSA 82a-12	212			Kevise	d 7/10/2015		