						ision of Wate	1			
				ge in Well Use		ources App. N		Well ID		
1 LOCAT	TON OF V	VATER WEI	LL:	Fraction	Sec	tion Number 22			ige Number	
County	PRATT		**************************************	1/4 1/4 NW 1/	A CL Z					
2 WELL OWNER: Last Name: DIANON First: SOOT Street or Rural Address where well is located (if unknown, distance and										
Business: 609 SANDTRAP ST direction from nearest town or intersection): If at owner's address, check here:										
Address: FROM THE INTERSECTION OF SE 130TH AVE AND SE 90TH Address: ST 1/2 Mile WEST SOUTH INTO 440 FT										
Address: City: WICHITA State: KS ZIP: 67235 ST 1/2 MILE WEST SOUTH INTO 440 FT										
3 LOCATI					120	1	······································			
WITH "		4 DEPTH	OF CO	MPLETED WELL:	35 ft	.   5 Latitu	ıde:		, -	
SECTIO		Depth(s) Gr	roundwater	Encountered: 1)	ft.	Longi	tude:		(decimal degrees)	
i N	ł					Honzo	ntal Datum: WGS 8		83 LI NAD 27	
l	x	WELL SS	WELL'S STATIC WATER LEVEL: 30 ft. 4/18/17 below land surface, measured on (mo-day-yr).				for Latitude/Longitude			
'			above land surface, measured on (mo-day-yr)				PS (unit make/model: (WAAS enabled? <b>[</b> ]			
NW	NE		Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map			
	E		after hours pumping gpm				Online Mapper			
1 1 1	, , ,	İ	Well water was ft.							
SW	St	after	after hours pumping gpm Estimated Yield: 65 cpm Bore Hole Diameter: 9.75 in. to 120 ft. and				6 Elevation;			
		Estimated \	Estimated Yield:			Source: Land Survey GPS Topographic Map				
	S aila I	Bore Hote I	Bore Hole Diameter: in. to It. and				Other			
7 WELL WATER TO BE USED AS:										
1. Domestic: 5. O Public Water Supply: well ID										
☐ Housel			6. Dewatering: how many wells?				11. Test Hole: well ID			
☐ Lawn &			7. Aquifer Recharge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical			
Livesto		8. 🖸	8. Monitoring: well ID			12. Geothermal: how many bores?				
2. Irrigati		9. Environmental Remediation: well ID			a) Closed Loop   Horizontal   Vertical					
			☐ Air Sparge ☐ Soil Vapor Extraction				h) Open Loop Surface Discharge Inj. of Water			
4. 🔲 Industr	ial		Recovery	☐ Injection		13. 🗖 Ot	her (specify):			
Was a chemical/bacteriological sample submitted to KDHE? Q Yes No If yes, date sample was submitted:										
Water well disinfeated? M Vec. IN No.										
8 TYPE OF CASING USED: D Steel D PVC D Other										
Casing diameter in to 24 ft., Diameter SCH 160 lbs./ft. Wall thickness or gauge No. ft.										
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)										
SCREEN PERFORATED INTERVALS: From 100 et a 120 et From et a et a et a										
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)  SCREEN-PERFORATED INTERVALS: From 100 ft. to 120 ft., From ft. to ft.  GRAVEL PACK INTERVALS: From 35 ft. to 100 ft., From ft. to ft.										
9 CROIT MATERIAL: Next coment   Coment grout   Rentante   Other										
9 GROUT MATERIAL 30 Neat coment Coment grout Bentonite Other Grout Intervals: From ft. to ft., From ft., From ft., From ft., From ft.										
Nearest source of possible contamination:										
Septic Tank										
Sewer I		_	Cess Pool	Sewage L		Fuel Storage		oned Water	Well	
☐ Waterti	ght Sewer Li	ines 🔲	Scepage Pi	t ☐ Feedyard		Fertilizer Stor	rage ☐ Oil We	ell/Gas Well		
Other (Specify)     Direction from well?  Distance from well?  Distance from well?										
DATE MONTH							LITHO. LOG (cont.) or		GINTEDUALC	
10 FROM	5 TO	TOPSOIL S	<u>LITHOLO</u> ANDY	GIC LUG	FROM	10	LITTO, LOG (CORE.) O	LLUGGIN	J DATEKANT2	
		DARK IAN			-					
		SAND WITE		TRIPS			<del></del>	<del></del>		
		SAND AND								
$\vdash$							· · · · · · · · · · · · · · · · · · ·			
$\vdash$			····		Notes:					
Indies:										
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was all constructed I reconstructed or I phonoid										
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) 4/18/17 and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No. 845 This Water Well Record was completed on (mo_day-year) 5/11/17 under the business name of 4 BROTHERS LLC Signature										
Kansas Wat	ter Well Co	ntractor's Lic	ense No.	This W	ater Well Rec	ord was con	Metation (mo day-y	ear) 5/11/1	7	
under the bi	usiness nam	e of 4 BRO	IHERS L	LC	Si	gnature . <i>UL</i>	CUP SST		******	
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.										
1				66612-1367. Mail one to			ne for your records. Teleph			
Visit us at http	://www.kdhek	s.gov/waterwell/	index.html		KSA 82a-12	14		Keyised	7/10/2015	