		RECORD		WWC			vision of Wat ources App.			/ell ID		
☐ Original Record ☐ Correction ☐ Chang  1 LOCATION OF WATER WELL:			Fracti			ction Numb		nip Number	ge Number			
County: KiowA					NW1/4 3 1/4		27				□ E <b>E</b> CW	
		Last Name:	and	First:	JASON	Street or Ru	Street or Rural Address where well is located (if unknown, distance and					
Business:	Business:						direction from nearest town or intersection): If at owner's address, check here:  From Greens burg go 8 1/2 miles South on					
Address:							rensbu	19 90 84	z mi hes	Sant	k on	
	Address: City: Greensburg State: KS ZIP: 67054 Ake 31 well on 87457 Side of ave 31											
3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL: 10 ft. 5 Latitude: (decimal degrees)												
WITH "		4 DEPT	H OF CO	MPLET	ED WELL: .	1						
	TION BOX: Depth(s) Groundwater Encountered: 1)											
					TER LEVEL: 66 ft.			Source for Latitude/Longitude:				
□ below land surface.				e, measur	, measured on (mo-day-yr)			GPS (unit make/model:				
above land surface,				e, measur	, measured on (mo-day-yr)!!!			(WAAS enabled? ☐ Yes ☐ No)				
Pump test data: Well w				water was	vater was ft.			☐ Land Survey ☐ Topographic Map				
w					s pumping gpm vater was ft.			☐ Online Mapper:				
					s pumping gpm							
<b>     </b>	Estimated Yield:/L				)gpm			6 Elevation:ft. Ground Level TOC				
	S Bore Hole Diameter: (.				0. %. in. to!!!! ft. and			Source: Land Survey GPS Topographic Map				
<del></del> 1 r	nile				in. to ft.			☐ Other				
7 WELL WATER TO BE USED AS:												
					ter Supply: well ID			10. Oil Field Water Supply: lease				
					g: how many wells?			11. Test Hole: well ID				
_					charge: well ID			thermal: how n				
2. Irrigati					diation: well ID							
3. ☐ Feedlot ☐ Air Sparge								a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
4. 🔲 Industi			Recovery					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 JOINTS: ☑ Glued ☐ Clamped ☐ Welded ☐ Threaded												
Casing diameter												
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)												
☐ Continuous Slot												
					ft. to . ! !				From	ft to	ft	
G	RAVEL P	ACK INTER	VALS: Fro	m 105	ft. to 4.	ft From	ft 1	to ff	From	ft to	Ω	
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other												
Nearest sou	rce of poss	ble contamina	tion:	,			,					
☐ Septic			Lateral Lin	ies	☐ Pit Privy		Livestock P		☐ Insecticide	Storage		
☐ Sewer Lines ☐ Cess Pool							Fuel Storage					
	ight Sewer	_	] Seepage Pi		☐ Feedyard		Fertilizer St	_	Oil Well/G	as Well		
Direction fro	Specify)	499	• • • • • • • • • • • • • • • • • • • •	D	istance from we		999		Δ			
10 FROM	TO		LITHOLO			FROM	TO			ICCINC	SINTERVALS	
O	20	Ta			o Streaks	80	28		Ster E	UGGINC	INTERVALS	
20	25	Fine		,			97	JANC	DAME			
25	35			and	W/CIAY S	85	105	El a	A ( 1			
35	42	TAN	Stene	(HA	-/)	25	705	Blue	CAY			
42	50	TAM		(7774	<del>/</del>				<u> </u>			
50	55	Ene	Sand			<del>                                     </del>						
55	65	TAN	Hay			Notes:	L					
65	70	Fine	Tan S	and		<b>—</b> 170609						
70	80	TAM	5And	<i></i>		1						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was X constructed or plugged												
under my jurisdiction and was completed on (mo-day-year) 11.7.1.2												
Kansas Water Well Contractor's License No. 12.7 This Water Well Record was completed on (more day-year) 12.7.2												
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit Set of \$5.00 for each constructed well along with one (white) copy to Kansas												
INSTRUC	CTIONS: Send Department of	one copy to WAT Health and Environ	ER WELL OW! iment, Bureau o	NER and reta f Water, Geo	ain one copy for you clogy Section, 1000	r records. Subm SW Jackson St.,	see of \$5.00 fo	r each constructed v	vell along with one 367. Telephone (7	e (white) co (85) 296-35	py to Kansas 65.	

KSA 82a-1212

Revised 9/10/2012

Visit us at http://www.kdheks.gov/waterwell/index.html