WALL	KWEI	L RECORD		Form W	WC-5	Di	vision of Wate	r Resources App. N	0.	
1 LOCATION OF WATER WELL:			Fraction		Section	on Number	Township No.	Range Number		
County: JOHNSON			11.85104K	にゅろにゅ	1	7		R 25 X E □W		
County: JOHNSON NUNSUM T 12 S R Street/Payed Address of Well I section if unknown distance & direction Clobal Positioning System (CPS) in face									formation:	
Street/Rural Address of Well Location; if unknown, distance & direction Global Positioning System (GPS) information:										
from nearest town or intersection: If at owner's address, check here \(\overline{\Bigs}\). Latitude: (in decimal degrees)										
Longitude: (in decimal degr									(in decimal degrees)	
Elevation:								• • • • • • • • • • • • • • • • • • • •		
							<u>Datum</u> : ☐ WGS 84, ☐ NAD 83, ☐ NAD 27			
2 WATER WELL OWNER: Mark Otterstrain / Roxange							Collection Method:			
RR#, Street Address, Box #: 6815 wood son Nutton							GPS unit (Make/Model:)			
City State 7TD Code										
City, State, ZIP Code : Cociland Park. K 5 66964 Est. Accuracy: (3 m, 3-5 m, 5-15 m, 5-15 m, 1>15									6 16 m	
A LOCATE MELA										
3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 400 ft. 3-400' Bores										
	WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 490									
SECT	TION BO	ION BOX: Depth(s) Groundwater Encountered (1).0								
	N WELL'S STATIC WATER LEVEL0ft. below land surface measured on mo/day/yr									
	Pump test data: Well water wasft. after hours pumping									
'	EST VIELD 0 come Well water was A offer house surraines									
	NW -NE EST. TIELD. Ugpm. well water was									
w	W Bore Hole Diameter 6" in. to 400 ft., and in. to ft.									
1 	WELL WATER TO BE USED AS: Public water supply Geothermat Injection well									
611	1	7 1 1 1 1 10	mestic	☐ Feedlot ☐	Oil field wat	er suppl	v □ De	watering \ \ \ \ \	Other (Specify below)	
SWSE Domestic Feedlot Oil field water supply Dewatering Other (Specify below) Irrigation Industrial Domestic-lawn & garden Monitoring well CLOSED										
Was a chemical/bacteriological sample submitted to Department? Yes No										
S If yes, mo/day/yr sample was submitted										
Water well disinfected? ☐ Yes ☑ No										
5 TYPE OF CASING USED: Steel PVC Other H.D. POLYETHYLENE										
CASING JOINTS: Glued Clamped Welded Threaded Fusion										
Casing diameter										
Casing height 2550 land surface 36 in., Weight SDR11 lbs./ft., Wall thickness or gauge No. 160 PSI										
Type of Copeny of Dependent Attorney Attended										
TYPE OF SCREEN OR PERFORATION MATERIAL: None										
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)										
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)										
SCREEN OR PERFORATION OPENINGS ARE: None										
☐ Continuous slot ☐ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole)										
Louvered shutter Key punched Wire wrapped Saw cut Other (specify)										
SCREEN-PERFORATED INTERVALS: From										
From										
				From	π. to	• • • • • • • • • •	ft., From	ft.	to ft.	
ţ	GRAV	EL PACK INTEI	RVALS:	From	ft. to		ft., From	ft.	to ft.	
1				From	ft. to		ft., From	ft.	to ft.	
From										
6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other										
					n	и. ю	п.,	From	. π. ιοπ.	
What is the nearest source of possible contamination:										
Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below)										
	Sewer lin		Cesspool	☐ Sewage lagoon	☐ Fuel storage	ge	■ Abandoned	l water well		
	Watertig	ht sewer lines 🔲	Seepage p	it	Fertilizer s	torage	Oil well/ga	s well		
Direction from well										
FROM	ТО		THOLOG		FROM	TO			GGING INTERVALS	
***					I KOW	10	LITTO. L	od (cont.) of FLC	GOING INTERVALS	
0	13	SOIL/CLAY	203-20							
13	20	SANDSTONE	208-289	SHALE						
20	37	LIME	289-309							
					+	***	 		,	
37	88	SHALE (SHALE	1		0 400:	3E0 B: ::6 ===		
88	90	LIME	329-330		400	3		RES PLUGGED		
90	151	SHALE (330-400	SHALE			HIGH SOL	ID BENTONITE		
151	160	LIME	1		T					
			L							
160	168	SHALE			1					
168	180	LIME	}							
180	203	SHALE								
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \(\bigcirc\) constructed, \(\bigcirc\) reconstructed, or \(\bigcirc\) plugged under my jurisdiction and was completed on (mo/day/year) \(\bigcirc\). \(\bigcirc\) and this record is true to the best of my knowledge and belief.										
under m	y jurisdi	ction and was cor	mpleted or	n (mo/day/year) 🛆 .	.ع.ن. تخ. الم. a	na this r	ecord is true t	to the best of my k	moydeage and belief.	
Kansas '	Water W	ell Contractor's l	License No	o 561 This	Water Well R	ecord w	vas completed	off (mo/day/year)	7-17-14	
under th	e busine	ss name of EV	ANS ENE	RGY DEVELOPME	ENT, INC.	by (s	signature	setto!	Land	
									answers. Send one copy to	
Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at										
1 Cicpilo		. 152 Della olic cop	.,		-			cuon consuluc	tolt us ut	
http://www.kdheks.gov/waterwell/index.html										