WATER WELL RECOR	RD Form	WWC-5	Division of Wat	ter Resou	ırces; App. No.		
1 LOCATION OF WATER County: Lyon Distance and direction from nea	WELL: Fraction NW 1/4	NW 4 NW 4	Section Nu 2	ımber	Township Number T 21 S	Range Number R 11 E	
Distance and direction from neal located within city? 10 Comme	arest town or city street	address of well it	Global Posi Latitude:	itioning N 38.	System (decimal deg 25934°	rees, min. of 4 digits)	
located within city? 10 Comme	Longitude:	ngitude: W 96.16942°					
2 WATER WELL OWNER Craig Schreiner (Murphy Oil Company, Inc.)			Elevation:	Elevation: RIM: 1192.48; TOC: 1192.14			
RR#, St. Address, Box # : P.O. Box 145			Datum:	Datum: NAD 29 Data Collection Method: legal survey			
City, State, ZIP Code : Olpe, KS 66865 Data Collection Method: legal survey 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 14.91 ft.							
LOCATON MW15							
WITH AN "Y" IN Dent	th(s) Groundwater Enco	ountered 1		ft. 2	ft. 3	ft.	
SECTION BOX: WEL	LL'S STATIC WATER	LEVEL 8.81	nt. below lar	na surta	ce measured on more	day/y1 3/6/13	
N Pump test data: Well water was ft. after hours pumping gpr							
Est. Yield gpm: Well water was ft. after hours pumping gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well							
1 1 1 1 1 2 7 11 CO1 C 11 C 11 C 11 D Dovotoring 12 Other (Specify below)							
W 1 1 2 1 1 2 1 1 2 1 2 1 1							
SW—SE—							
Was a chemical/bacteriological sample submitted to Department? Yes No X; II yes, IIIO/Qay/yrs							
S Sample was submitted Water Well Disinfected? Yes No X							
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped							
(2) PVC 4 ABS 7 Fiberglass Threaded X						aded X	
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded 2 PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 10 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.34 ft., Weight lbs./ft. Wall thickness or gauge No.							
Casing height below land surface 0.34 ft., Weight lbs./ft. Wall thickness or gauge No.							
TYPE OF SCREEN OR PERFORATION MATERIAL. 1 Steel 3 Steinless steel 5 Fiberglass (7) PVC 9 ABS 11 Other (specify)							
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass (7) PVC 9 ABS 11 Other (specify) 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)							
ICONTENT OF DEDEOD ATION OPENINGS ARE:							
1 Continuous slot 3 Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)							
SCREEN-PERFORATED INTERVALS: From 4.91 ft. to 14.91 ft. From ft. to ft. From ft. to ft.							
	From	11. 10)	n. Fr	om n.	10.	
GRAVEL PACK INTE	CRVALS: From	3 ft. to	15.27	π. Fr	om 11.	11.	
	From	ft. to)	_ n. rr	om II.	11.	
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-1 ft. Grout Intervals From 1 ft. to 3 ft. From ft. to ft. From ft. to ft.							
Grout Intervals From 1 ft. to 3 ft. From ft. to ft. From ft. to ft.							
What is the nearest source of possible contamination:							
1 Septic tank 2 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11) Fuel storage 14 Abandoned water well below)							
3 Watertight sewer lines 6			tilizer storage	15 Oil	well/ gas well		
Direction from well? N How many feet? ~260ft							
FROM TO	LITHOLOGIC LOC	G FR	OM TO		PLUGGING IN'	ΓERVALS	
0 5 Brown s	silty clay			-	Maria de la companya		
	y clay with some iron	staining					
14.5 15.27 Limesto	one, hard						

				Flush	mount waiver from	BOW	
						tmated c= (2) =11	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 1) constructed, (2) seconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 4/22/13 and this record is true to the best of my knowledge and belief.							
under my jurisdiction and was completed on (mo/day/year) Kansas Water Well Contractor's License No							
under the business name of Lar	rsen & Associates. Inc.	by (s	ignature)		-		
INSTRUCTIONS: Please fill in blan	INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water,						
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send of the WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.							