WATEI	R WET	L RECORD	Form W	WC-5	Division of Wate	r Resources App. No	48216	
1 LOCATION OF WATER WELL:		Fraction		Section Number	Township No.	Range Number		
			NE 1/4 SE 1/4 NW	/ 1/4 SF 1/4		T 30 S	R 1 ZE W	
	County: Sumner NE 1/4 SE 1/4 NW 1/4 SE 1/4 Street/Rural Address of Well Location; if unknown, distance & direction							
		own or intersection: If at		Global Positioning System (GPS) information: Latitude: .37,41198(in decimal degrees)				
			owner's address, eneck	Longitude: 097.26259 (in decimal degrees)				
Fron	n Belle I	Plaine 1E 1 1/4N WSR			Elevation: 1193			
					Datum: WGS 84, NAD 83, NAD 27			
2 WATER WELL OWNER: Paul Lange					Collection Method:			
RR#, Street Address, Box #: 1074 N. Conwav Springs Rd.					Collection Method:  ☐ GPS unit (Make/Model: Garmin 62S)			
City, State, ZIP Code : Conway Springs, Kansas 67031					Digital Map/Photo, Topographic Map, Land Survey			
		. Conwar	/ Springs, Kansas 67	031	Est. Accuracy:	3 m. <b>7</b> 1 3-5 m.	5-15 m. □ >15 m	
3 LOCATE WELL								
	WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 34 ft.							
SECT	TION BOX: Depth(s) Groundwater Encountered (1)							
	Depth(s) Groundwater Encountered (1)							
	Pump test data: Well water wasft. after hours pumping gpm							
	ECT VIELD W-11 W-11							
w   NV	1 1 1 W 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
VV	WELL WATER TO BE USED AS: Public water supply Geothermal Injection well							
'	Departies Departies Delicities Delicities Department Department Department Delicities Department Delicities Department Delicities De							
SW	SW  SE     Domestic   Feediot   On field water supply   Dewatering   Other (specify below)							
	Was a chemical/bacteriological sample submitted to Department? Yes No							
	S If yes, mo/day/yr sample was submitted							
'		water well dish					n kikkula sempan tilan kinn kinn api akan niminin kinn kinn na manak terakten yang palaksa palaksi pekangan ka	
5 TYPE OF CASING USED: Steel PVC Other								
CASING JOINTS:  Glued  Clamped  Welded  Threaded								
Casing diameter 10 in to 19 ft., Diameter in to ft., Diameter ft., Diameter in to								
Casing height above land surface. 24 in., Weight .160 lbs./ft., Wall thickness or gauge No413								
		EN OR PERFORATION			,	0 0		
☐ Steel ☐ Stainless Steel ✔ PVC ☐ Other (Specify)								
Brass Galvanized Steel None used (open hole)								
SCREEN OR PERFORATION OPENINGS ARE:								
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 ft., From ft. to ft.								
GRAVEL PACK INTERVALS: From 34 ft. to 15 ft., From ft. to ft. to								
From ft. to ft., From ft. to ft.								
6 GROUT MATERIAL: Neat cement Cement grout Dente Other								
Grout Intervals: From								
What is the nearest source of possible contamination:								
Septic tank								
Sewer lines								
		ht sewer lines  Seepage		Fertilizer s		8 1 / A		
		n well			from well			
FROM	ТО	LITHOLOG		FROM			JGGING INTERVALS	
0	3	Top soil				4.77	erinde vangeringsbiede er jaar de bekende er bestelde de bestelde er gegen heer van de eerstelde er van de eer	
3	9	Tan clay		<del>                                     </del>				
9	20	Small sand and gravel	***************************************	<del>                                     </del>				
	31			<del> </del>	***************************************			
20		Small-med, sand and	graver	<del> </del>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
31	34	Shale						
	ļ							
		annyan kita kidik di Makaya marijahan kata Makaya da di Karasia aya palikhan sa ta 1988 kili Makaya da di Makaya marijahan kata da di Karasia aya ka kata da di Makaya						
				<u> </u>				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \( \bigsize \) constructed, \( \bigsize \) reconstructed, or \( \bigsize \) plugged								
under my jurisdiction and was completed on (mo/day/year) .1/29/2015 and this record is true to the best of my knowledge and belief.								
Kansas Water Well Contractor's License No. 134 This Water Well Record was completed on (mo/day/year) 2/4/2015								
under the business name of Rosencrantz-Bemis Ent. by (signature)								
INSTRUCTIONS: Use ty pewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies								
(white, blue, pink) to Kansas Depar tment of Health and E nvironment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 666 12-1367.								
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. Vi sit us at								
http://www.kdheks.gov/waterwell/index.html.								
KSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy								