| COST & PRINTS | man wwania | rmiconn | Form WV | VC 5 | Division of Wate | er Resources App. N | 48650 |
|---|--|--|-----------------------------|--|--|--|--|
| | | L RECORD | Fraction Form vv v | AC-3 | Section Number | Township No. | Range Number |
| | LOCATION OF WATER WELL: County: Sumner | | SW 1/4 NE 1/4 SE 1/4 SW 1/4 | | 10 | T 33 S | R 2 ZE W |
| Stre | eet/Rural A | ddress of Well Location; | | Global Positioning System (GPS) information: | | | |
| froi | m nearest to | own or intersection: If at | owner's address, check | Latitude: .37.19050 (in decimal degrees) | | | |
| | | Plain 4E 1S 3/4 E SSR | , | Longitude: 097.19623 (in decimal degrees) | | | |
| THE DOING FROM THE TO OFF IN OOK | | | | | Elevation: .1118 | | |
| A XX7 A FUELD XX/EXX Y AXX/RIFED. | | | | | Datum: ☐ WGS 84, ☐ NAD 83, ☑ NAD 27 | | |
| 2 WATER WELL OWNER: Rick Totten RR#, Street Address, Box #: 1724 E. 20th Str. S. | | | | | Collection Method: GPS unit (Make/Model: Garmin 62S) | | |
| | ty, State, Z | | | | Digital Map/Photo, V Topographic Map, Land Survey | | |
| Ci | ty, State, Zi | . Oxford, | Kansas 67119 | | Est. Accuracy: | | |
| 3 LOCATE WELL 41 | | | | | | | |
| | WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 41 ft. | | | | | | |
| SE | SECTION BOX: Depth(s) Groundwater Encountered (1) | | | | | | |
| | Pump test data: Well water wasft. afterhours pumping | | | | | | |
| | EST. YIELDgpm. Well water wasft. afterhours pumpinggpm. Well water wasft. | | | | | | |
| | | | | | | | |
| W | WELL WATER TO BE USED AS: ☐ Public water supply ☐ Geothermal ☐ Injection well | | | | | | |
| | ☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below) | | | | | | |
| | Irrigation Industrial Domestic-lawn & garden Monitoring well | | | | | | |
| L | Was a chemical/bacteriological sample submitted to Department? Yes V No | | | | | | |
| s If yes, mo/day/yr sample was submitted | | | | | | | |
| mile Water well disinfected? ✓ Yes □ No | | | | | | | |
| 5 TYPE OF CASING USED: Steel PVC Other | | | | | | | |
| CASING IOINTS: 7 Glued Clamped Welded Threaded | | | | | | | |
| Casing diameter 10 in to 26 ft. Diameter in to ft., Diameter in to ft. | | | | | | | |
| Casing height above land surface .24 in., Weight .160 lbs./ft., Wall thickness or gauge No413 | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Stainless Steel PVC Other (Specify) | | | | | | | |
| ☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify) | | | | | | | |
| 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 | | | | | | | |
| GRAVEL PACK INTERVALS: From 41 ft. to 15 ft., From ft. to ft. | | | | | | | |
| From ft to ft From ft to ft to ft | | | | | | | |
| COPOLITE MATERIAL. Next coment Coment grout Managing Cother | | | | | | | |
| 6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From .15 ft. to .0 ft., From ft. to ft., From ft. to ft. | | | | | | | |
| What is the pagreet course of possible contamination: | | | | | | | |
| Septic tank | | | | | | | |
| Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well | | | | | | | |
| · | | ht sewer lines | | Fertilizer s | | 5 | |
| | | n wellLITHOLO | | FROM | | | UGGING INTERVALS |
| FRO | M TO 3 | | dic rod | I KOW | TO BITTIO. | 300 (40,111) 52,11 | |
| 3 | 7 | Top soil Brown clay | | | | and the second s | |
| 7 | 18 | Small-med. sand & gr | avel | | | | |
| 18 | 28 | Brown clay | | | | | |
| 28 | 37 | Medsmall S & G w/r | ock mix | | The second section of the sect | | |
| 37 | 41 | Shale | | | | | |
| <u> </u> | | | | | | | |
| | | | | | | | |
| | | erreptische zum zu zu zu zugebrund gefanzund gewender zu zu wird zu der den der zu zugebilde gewender dem der die Weiter der der der der der der der der der d | | | | | |
| | | | | | | - Paristi | general production of the second of the seco |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \(\sqrt{\omega}\) constructed, \(\sqrt{\omega}\) reconstructed, or \(\sqrt{\omega}\) plugged | | | | | | | |
| under my jurisdiction and was completed on (mo/day/year) .2/3/2015 | | | | | | | |
| Kans | sas Water W | Vell Contractor's License | No. 134 This | Water Well | Record was complet | ed on (mo/day/yea | ır) 2/10/2015 |
| under the business name of Rosencrantz-Bemis Ent. by (signature) by (signature) 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 | | | | | | | |
| Telep | hone 785-296 | -5524. Send one copy to W | ATER 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 | | | | | | | |
| KSA 82a-1212 Check: ✓ White Copy, ☐ Pink Copy | | | | | | | |