WATER WELL R		WWC-5		vision of Water		MW-1	15	
Original Record		e in Well Use		ources App. No.		Well ID		
1 LOCATION OF W.	ATER WELL:	Fraction	\$	ction Number	Township Numb			
County: Brown	1/4 NW 1/4 NW 1/4							
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and								
Business: Sac n Fox direction from nearest town or intersection): If at owner's address, check here:								
Address: 1346 US 75 Highway Address: Sac n Fox Fuel Station Fac								
City: Powhattar	ZIP: 66527 1346 US 75 Highway, Powhattan, KS 66527			27				
3 LOCATE WELL								
WITH "X" IN	4 DEPTH OF COM	*	5 Latitude:(decimal degrees)					
SECTION BOX:	Encountered: 1) 3)N/A ft., or 4) [
N		Horizontal Datum: ■ WGS 84 □ NAD 83 □ NAD 27						
WELL'S STATIC WATER LEVEL: ft.					or Latitude/Longitude			
	below land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr)				, ,			
NW NE	Pump test data: Well w				(WAAS enabled? Yes No)			
WV E	after N/A hours	onm		■ Land Survey ☐ Topographic Map ☐ Online Mapper:				
	Well v	afterN/A hours pumping N/A gpm Well water wasN/A ft. □ Online Map						
SW SE	after N/A hours	s pumping N/A	gpm					
	Estimated Yield:N/Agp					. Ground Level		
S	Bore Hole Diameter:	8.25 in to 20	0 ft. and Source: Land Surve					
mile		N/A in. to N/A	ft.		Other			
7 WELL WATER TO								
1. Domestic:		iter Supply: well ID				ease		
Household	6. Dewaterin	g: how many wells?			e: well ID			
□ Lawn & Garden 7. □ Aquifer Recharge: well ID □ Livestock 8. ■ Monitoring: well ID				Cased Uncased Geotechnical				
Livestock				12. Geothermal: how many bores?				
2. ☐ Irrigation 3. ☐ Feedlot	2. ☐ Irrigation 9. Environmental Remediation: well ID.							
4. ☐ Industrial	☐ Air Spargo ☐ Recovery		Extraction			ischarge IIII. 61 wat		
Was a chemical/bacter		nitted to KDHE?	Yes No	If yes, date sa	ample was submitte	:d:	****	
Water well disinfected?								
8 TYPE OF CASING	USED: ☐ Steel ■ PV	C Other	CASI	NG JOINTS: [☐ Glued ☐ Clamped	d Welded Threa	ided	
Casing diameter 2	in. to ft.,	DiameterN/A	in. to	A ft., Diamete	er!\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	!N/A ft.		
Casing height above land surface								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)								
			usea (open no	(3)				
SCREEN OR PERFORATION OPENINGS ARE:								
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)								
SCREEN-PERFORATE	ED INTERVALS: From	3 ft to 20	ft From	N/A # to N	VA 6 From N	/A ft to N/A f	A	
SCREEN-PERFORATED INTERVALS: From .3								
O CROUT MATERIAL: Diseasement Dicement group Pontonice Debay Concrete 0-0.5 feet								
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other Concrete 0-0.5 feet Grout Intervals: From . 0.5 ft. to . 2.5 ft., From . N/A ft. to . N/A ft. to . N/A ft. to . N/A ft.								
Nearest source of possible contamination:								
Septic Tank Lines Pit Privy Livestock Pens Insecticide Storage								
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well								
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well								
☐ Other (Specify) Direction from well? South Distance from well? 50-feet ft.								
Direction from well? . Sol								
10 FROM TO	LITHOLOG		FROM	TO LI	THO. LOG (cont.) or	r PLUGGING INTERV	ALS	
	ML: med., moist, gy, s							
	CH: med., moist, gy-b							
12 20 N	ML: med., moist, tan-	org, sandy SILT						

			Notes:					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged								
under my jurisdiction and was completed on (mo-day-year) .8-15-20.18 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No759 This Water Well Record was completed on the day-year) .9/15/2018 under the business name of RAZEK Environmental LLC								
Kansas Water Well Con	itractor's License No.	(スタ This W	ater Well Re	cord was comp	letted on tho lay-y	ear) .9/1.5/2018		
under the business name	INDIVICE ALL TO SERVICE TO SERVICE OF THE SERVICE O	DEDIAL LLG	neac Dans	ignature .	vironmant Durani acu	Valor GWTS Section		
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section. 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.								
Visit us at http://www.kdheks		00014-1307. Wall one to	KSA 82a-1		ioi your records. Telepi	Revised 7/10/2015	5	
. 1011 GO GUILLD.// WWW.KUIICKS	TO TO THE WORLD WORLD THE CALIFORNIA		12011 0661					



Imagery ©2017 DigitalGlobe, Map data ©2017 Google United States 50 ft

Monitoring Well Location
 Destroyed Monitoring Well

PROJ.# 17102679	PAGE#			
SCALE: AS SHOWN	DRAWN BY:			
FILE NO.	DESIGNED BY:			
DATE: AF	PROVED BY:			

Terromext

FIGURE 1 SITE MAP

SAC & FOX TRUCK STOP 1346 US 75 HIGHWAY POWHATTEN, KANSAS