	WELL R			WWC-5			ion of Water] Wall ID	MW-19		
	Record			e in Well Use			rces App. No		Township Numb	Well ID	nge Number		
	ION OF W : Brown	ATER WEI	LL:	Fraction 1/4 NW 1/4 NW 1/5	4 SW 1/4		on Number 15	ĺ	T 4 S	R 1	5 ■ E □ W		
2 WELL OWNER: Last Name: First Street or Rural Address where well is located (if unknown, distance and											n, distance and		
Address: 1246 US 75 Highway							from nearest town or intersection): If at owner's address, check here:						
Address:						Sac n Fox Fuel Station Facility							
City: Powhattan State: KS ZIP: 66527 1346 US 75 Highway, Powhattan, KS 66527													
4 DEPTH OF COMPLETED WELL: T. 15 Latitude:											(decimal degrees)		
	SECTION BOX: Depth(s) Groundwater Encountered: 1)5							ft. Longitude:95.72750000(decimal degrees) Well Horizontal Datum: ■ WGS 84 □ NAD 83 □ NAD 27					
WELL'S STATIC WATER LEVEL:4./3							Source for Latitude/Longitude:						
	below land surface, measured on (mo-day-yr). above land surface, measured on (mo-day-yr).						☐ GPS (unit make/model:						
NW	Pump test data: Well water was						■ Land Survey □ Topographic Map						
w x	e afterN/A. hours pumping N/A					pm Online Mapper:							
sw	Well water was								4405				
	Estimated Yield: N/Agpm					6 Elevation:			. 1135 f	35 ft. Ground Level TOC			
	S Bore Hole Diameter:8.25 in. to					ft. and Source: Land Survey GPS Topographic Other							
1 mile													
1. Domestic: 5. \square Public Water Supply: well ID													
_	☐ Household 6. ☐ Dewatering: how many wells?						11. Test Hole: well ID						
	□ Lawn & Garden 7. □ Aquifer Recharge: well ID □ Livestock 8. ■ Monitoring: well ID												
1 —	2. ☐ Irrigation 9. Environmental Remediation: well ID						a) Closed Loop						
					Extraction b) Open Loop Surface Discharge Inj. of Water								
4. Industrial Recovery Injection 13. Other (specify):													
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:													
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other													
Casing diameter 2 in to 5.0 ft., Diameter N/A in to N/A ft., Diameter N/A in to N/A ft. Casing height above land surface 30 in Weight N/A lbs./ft. Wall thickness or gauge No. Sch. 40.													
Casing height above land surface													
☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)													
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)													
SCREEN OR PERFORATION OPENINGS ARE: □ Continuous Slot ■ Mill Slot □ Gauze Wrapped □ Torch Cut □ Drilled Holes □ Other (Specify)													
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)													
SCREEN-PERFORATED INTERVALS: From .5.0													
GRAVEL PACK INTERVALS: From4.0 ft. to19 ft., FromN/A ft. toN/A ft. toN/A ft. toN/A ft.													
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other Concrete 0-2.0 feet Grout Intervals: From 2.0 ft. to 4.0 ft., From N/A ft. to N/A ft., From N/A ft. to N/A ft.													
Nearest source of possible contamination:													
☐ Septic			Lateral Lin Cess Pool	es ☐ Pit Privy ☐ Sewage I	9000n		Livestock Per Fuel Storage			ticide Storag doned Wate			
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well													
☐ Other (Specify) Direction from well?													
10 FROM	TO	<u> </u>	LITHOLO	GIC LOG	FRO		TO	LIT	HO. LOG (cont.)	or PLUGGI	NG INTERVALS		
0	10.5	ML: med., r	noist, gy,	sandy SILT									
10.5				orn, silty CLAY									
12	19	ML: med., r	noist, tan-	org, sandy SILT		_		· .					
						\dashv				·····			
					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) .4/27/2020 and this record is true to the best of my knowledge and belief.													
Kansas Water Well Contractor's License No. 759 This Water Well Record was completed on (mo-day-year) 5/4/2020													
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.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015												
visit us at nit	<i>J.H</i> www.Kanek	s.gov/waterwell	/maex.ntml		NOM 02	<u>a-12</u>	14			TCV 1St	U // IV/4VIJ		