	WELL			WWC-5			ivision of W					
	I Record [ge in Well Use Fraction			sources App ection Num		Township Num	Well ID	nga Numban	
Count		4 SE 1/4		21	ber	Township Num T 10 S		nge Number 3 □ E ■ W				
2 WELL OWNER: Last Name: CROSSON First: TYLER Business: Street or Rural Address where well is located (if unknown, or direction from nearest town or intersection): If at owner's address, cl												
Address: Address: 1537 NUGGET ROAD City: MINNEAPOLIS State: KS ZIP: 67467												
3 LOCAT	E WELL		MPLETED W	140	ft. 5 Lat	5 Latitude: 39.164614 (decimal degrees)						
SECTION ROY. Depth(s) Groundwater				Encountered:	ft.	Lor	Longitude: 97.654260 (decimal degrees)					
N			2) ft. 3) ft., or 4) \[\sqrt{1} \] VELL'S STATIC WATER LEVEL: 58									
			below land surface, measured on (mo-day-yr)				Sou	Source for Latitude/Longitude: GPS (unit make/model: GARMIN)				
NW	NE	☐ above	above land surface, measured on (mo-day-yr)					(WAAS enabled? ☐ Yes ☐ No)				
		Pump test	Pump test data: Well water was				☐ Land Survey ☐ Topographic Map					
W	E	after	Well water was ft.				m Online Mapper:					
SW	SE	after	after hours pumpingg				m 6 Elevation: 1331ft. ■ Ground Le					
	للل	Estimated	Yield:	gpm	140	0 1	6 Ele	vation	Land Survey	t. Ground	d Level TOC	
ļI	S mile	Bore Hole		28 in. to .			<u>30u</u>	<u>rce</u>	Other GOOGLE	EARTH	opograpnic Map	
7 WELL WATER TO BE USED AS:												
1. Domestic		5.	☐ Public Wa	ater Supply: w				Oil Fie	eld Water Supply:	lease		
_	Household 6. Dewatering: how many wells?											
1 =	□ Lawn & Garden 7. □ Aquifer Recharge: well ID □ Livestock 8. □ Monitoring: well ID											
· -	2. ■ Irrigation 9. Environmental Remediation: well ID								Loop Horizor			
. —	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor E						b)	b) Open Loop Surface Discharge Inj. of Water				
4. Indust			Recovery						(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 IOINTS: ■ Glued ☐ Clamped ☐ Welded ☐ Threaded												
Casing diameter 16 in to 80 ft., Diameter in to ft., Diameter in to ft. Diameter in to 500 ft. Weight 15.853 lbs/ft. Wall thickness or gauge No 500												
Casing height above land surface												
TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)												
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE:												
	nuous Slot	Mill Slo		auze Wrapped /ire Wrapped		rch Cut	Drilled Hole None (Open	s 🔲	Other (Specify)	•••••		
SCREEN-I	PERFORAT	ED INTER	VALS: From	n 80 ft. t	to 140	ft From	None (Open	to	ft From	ft to	, ft	
SCREEN-PERFORATED INTERVALS: From . 80												
9 GROUT	9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other											
Grout Intervals: From												
☐ Septic			Lateral Line	es 🔲 Pir	t Privy		Livestock	Pens	☐ Insect	icide Storage	2	
Sewer			Cess Pool	☐ Se	ewage Lag		Fuel Storag		☐ Abanc	loned Water	Well	
	ight Sewer Li (Specify)] Seepage Pit		eedyard		Fertilizer S	torage	□ Oil W	ell/Gas Well		
☐ Other (Specify) Direction from well? ft.												
10 FROM	TO		LITHOLO	GIC LOG		FROM	TO		HO. LOG (cont.) c		G INTERVALS	
0		TOP SOIL		****			ļ					
5 14		CLAY SAND AND	CDAVEL	LAVEDS			 	+				
25		MIXED CO						+				
44				E SANDSTO	NE			+				
136		MED GRA						+				
139	141	MED GRA	Y CLAY HA	ARD SHALE		Notes:					7	
11 CONT	RACTOR'S	OR LANI	OWNER'S	S CERTIFIC	ATION	: This wat	er well was	DE CC	onstructed rec	onstructed	or Dugged	
under my i	11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) .06-20-2016 and this record is true to the best of the knowledge and belief. Kansas Water Well Contractor's License No. 480 This Water Well Record was completed on (mo-day-year) .11-09-2016											
Kansas Wa	ter Well Co	ntractor's Li	icense No. 🚣	180	This Wat	ter Well Re	cord was d	omnk	ted for (pio-day)	Zearî 11-09	9-2016	
Mail	I white copy alo	ong with a fee of	of \$5.00 for eac	ch constructed we	ell to: Kans	sas Departmer	it of Health an	id Envi	ronment, Bureau of V	Vater, GWTS	Section,	
1000	SW Jackson S	t., Suite 420, T	opeka, Kansas	66612-1367. Ma	ail one to V	Vater Well Ov	vner and retain	one fo	r your records. Telep	hone 785-296	-5524.	
Visit us at hit	/www.kdhek	s.gov/waterwel	l/index.html]	KSA 82a-1	212			Revised	17/10/2015	