WATER WE			WWC-5			on of Water	- 1	91	*** 11 ***	2166		
	ord Correct		ge in Well Use			rces App. N			Well ID			
1 LOCATION OF WATER WELL:			Fraction	Section	on Number	r	Township Number		Range Number			
County: Log		NW 1/4 SW 1/4 NE 1/										
2 WELL OWN	VER: Last Name:	Rohleder	First: Richard		or Rural Address where well is located (if unknown, distance and							
Business:	direction fr	irection from nearest town or intersection): If at owner's address, check here:										
Address: 3502 Hwy 83												
Address:	lalas i	State: KS	7ID: 67740									
2 LOCATE WELL												
l .	3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:					95 ft. 5 Latitude:(decimal degrees)						
WITH "X" IN	SECTION ROY. Depth(s) Groundwater Encountered: 1)				1							
l .	N 2) ft. 3) ft., or 4) ∐ .					ry Well Horizontal Datum: □ WGS 84 □ NAD 83 □ NAD 27						
WELL'S STATIC WATER LEVEL:68					ft. Source for Latitude/Longitude:							
□ below land surface, measured on (mo-day-yr						GPS (unit make/model:)						
NW NF	above land surface, measured on (mo-day-yr)											
	water was	ft.	☐ Land Survey ☐ Topographic Map									
w - -	s pumping 15	. gpm	gpm									
			water was									
and and				pumping gpm			6 Elevation:ft. Ground Level TOC					
	Estimated Yield:			٠ .	1							
			in. to ft. and			Source:						
1 may 1												
7 WELL WATER TO BE USED AS:												
1. Domestic: 5. Public Water Supply: well ID												
Household	1	g: how many wells?			11. Test Hole: well ID							
Lawn & Gar	den	lecharge: well ID										
☐ Livestock 8. ☐ Monitoring: well ID												
2. Irrigation 9. Environmental Remediation: well ID												
3. Feedlot Air Sparge Soil Vapor Extra						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:												
Water well disinfected? Yes No												
8 TYPE OF CASING USED: ☐ Steel PVC ☐ Other												
Casing diameter												
Casing diameter												
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:												
☐ 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 .75												
GRAVEL PACK INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From												
Nearest source of possible contamination:												
Septic Tank												
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? .north Distance from well? .60												
	O O	LITHOLO	GIC LOG	FRON	1	TO	LITI	HO. LOG (cont.) or	PLUGGI	NG INTERVALS		
0 15	top soil v	yellow										
15 20		clay strips										
20 35	red clay		****					 				
35 45		nd loose		<u> </u>					- /			
45 65		id stone & roo	·k	1	$\neg \vdash$							
			/N	+								
		med. tight sand oose sand No								4.1.		
75 85		pose sand Notes: ight sand & clay strips										
85 92		ia & clay strip	S									
92 95	shale			<u>, I</u>		11 -	_					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, or plugged												
under my jurisdiction and was completed on (mo-day-year) .31616 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 649												
Kansas Water W	cell Contractor's	License No!	yle Bartell I his W	ater Well	recor	u was con	uplet	EU ON (MO) day-ye	ar) 97.13			
Mail 1 white	conviona with a	fee of \$5 nn for an	ch constructed well to: Va	nsas Denorte	nent of	Health and	Favir	nment Rureau of W.	ter GWTC	Section		
Mail I 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.												
			. 00012-1307. Wan one to	KSA 82a				your records. Telephi		d 7/10/2015		
Tion us at muy.// WW	······································	TOTAL MANAGEMENT			<u> 4</u>							