WATER WELL RECORD Form WWC-5						Division of Water						
	■ Original Record				Resources App. No.				Well ID			
1 LOC	ATION OF	WATER WEL	L: •	Fraction		ection Nun	ıber	Township Number	Rar	nge Number		
County: Barton												
	2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance											
Business: SMG Farms Address: 1521 Amarado direction from nearest town or intersection): If at owner's a									address,	check here:		
Addres		Allialauu			3 South, 1	1/2 East	of Susa	ank				
City:	Wichita		State: KS	ZIP: 67212								
3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL:190 ft. 5 Latitude:38.59340 (decimal degree												
	"X" IN			Encountered: 1)		II. 5 Lai	ntude: .	09 74447	• • • • • • • • • • • • • • • • • • • •	(decimal degrees)		
SECT	SECTION BOX: Depth(s) Groundwater Encountered: 1)							98.74447 Datum:	iii Niada	(decimal degrees)		
		WELL'S ST	ATIC WAT	TER LEVEL:1.7	0n.	Sou	rce for I	Latitude/Longitude:	NAD.	83 LJ NAD 21		
	X			measured on (mo-day-		ž	GPS (u	nit make/model:)		
NW-	NE			measured on (mo-day-			W)	AAS enabled? Y	es 🗆 N	io)		
				ater was f			Land S	urvey 🗌 Topograph	ic Map			
W	E afterhours pumpinggpm Well water wasft.						Online	Mapper:	• • • • • • • • • • • • • • • • • • • •			
SW -	after hours pumping											
	Estimated Vield: onm							6 Elevation:ft. Ground Level TOC				
	S Bore Hole Diameter:10 in. to190 ft. and							Source:				
7 WELL WATER TO BE USED AS: 1. Domestic: 5. \(Public Water Supply: well ID												
1. Domestic: 5. □ Public Water Supply: well ID										******************		
	☐ Lawn & Garden						Cased Uncased Geotechnical					
Lives	Livestock 8. Monitoring: well ID 12. Geothermal: how many bores?											
2. 🔲 Irriga		9. En	vironmental	Remediation: well ID		a) (Closed I	Loop Horizontal	□ Vertice	cal		
	B. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extraction b) Open Loop ☐ Surface Discharge ☐ Ini. of Water									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 JOINTS: Glued Clamped Welded Threaded Casing diameter ft., Diameter in. to ft.												
Casing diameter in. to fi., Di												
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												
GRAVEL PACK INTERVALS: From 190 ft. to 20 ft., From ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other.												
Grout Intervals: From												
Nearest source of possible contamination:												
☐ Septic Tank ☐ Lateral 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)	None 📋 Se	epage Pit	☐ Feedyard	Ш	Fertilizer St	torage	Oil Well/Ga	s Well			
■ Other (Specify)												
10 FROM	TO	LI	THOLOGI	CLOG	FROM	TO	LITH	O. LOG (cont.) or PLU	IGGING	INTERVALS		
0	3	Top soil			156	164		clay w/ sandstone				
3	32	Yellow clay			164	177	Fire c		23.0011	-		
32	72	Brittle black sh	ıale		177	182	Sands					
72	105	Gray shale			182	190	Fire c	lay				
105	117		ite clay w/ sandstone streaks									
117	123	Gray shale										
123	135	Fire clay					Notes:					
135 143 Sandstone & clay												
143 156 Brown dakota clay 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
under my in	risdiction ?	ind was complete	ed on (mo-	day-year) 8-26-	1 mis wate	well was this record	is true	to the best of my lead	icted, or	plugged		
under my jurisdiction and was completed on (mo-day-year)8-26-19 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No134 This Water Well Record was completed on (mo-day-year)8-30-19. under the business name ofRosencrantz-Bemis Ent Inc												
unaer the b	usiness nam	ie oitynaeiic	Jauk-De	ກາເຈ.⊏ແບກເຂ	S1	znature	500	- aler				
Mail I	white copy al	ong with a fee of \$5.	.00 for each c	onstructed well to: Kansa	s Department	of Health and	Environ	ment, Bureau of Water. C	WTS Sec	tion		
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.												
v isit us at nub	arww.kanek	a.gov/waterwell/inde	Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015									