WATE	R'WE	LL RECORD	Form W	/WC-5	D	Division of Wate	r Resource	s App. No	). L		
			Fraction			Section Number Township No.			Range Number		
	County: Rush  Street/Rural Address of Well Location; if unknown, distance & direction					14 T 19 S R 18 □E ☑W					
				Global Positioning System (GPS) information:							
from nearest town or intersection: If at owner's address, check here						Latitude: (in decimal degrees)  Longitude: (in decimal degrees)					
4 3	ouiii, Z	1/2 East of Rush Center				ation:				imai degrees)	
2 WATER WELL OWNER: James Jecha						Datum: WGS 84, NAD 83, NAD 27					
RR#, Street Address, Box #: 3049 Hwy 96						Collection Method:  GPS unit (Make/Model:)					
City, State, ZIP Code : Timken, KS 67575						☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey					
2 100	A CORD MAY		Est.	Est. Accuracy:							
3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 290 ft.											
	TION BO	X: Denth(s) Ground	ft	(2)		ft. (	3)	ft			
SECTION BOX:  Depth(s) Groundwater Encountered (1)										8-13	
rump test data: Well water wastt. after hours pumping									gpm		
W NW EST. YIELD N/A gpm. Well water was ft. after hours pumping g  Bore Hole Diameter 10 in. to .290 ft., and									gpm		
W     E   Bore Hole Diameter 1.9											
-SWSE   Domestic   Feedlot   Oil field water supply   Dewatering   Other (Specify below)											
☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well Stock											
Was a chemical/bacteriological sample submitted to Department? Yes V No											
S If yes, mo/day/yr sample was submitted											
5 TYPE OF CASING USED: Steel PVC Other											
CASING JOINTS: Glued Clamped Welded Threaded											
Casing diameter .5 in. to .290 ft., Diameter in. to ft. Diameter in to											
Casing height above land surface. 18 in. Weight SDR-17 lbs/ft. Wall thickness or gauge No.											
TYPE OF SCREEN OR PERFORATION MATERIAL:  Steel Stainless Steel PVC Other (Specify)											
Steel     Stainless Steel     ✓ PVC     □ Other (Specify)       Brass     □ Galvanized Steel     □ None used (open hole)											
SCREEN OR PERFORATION OPENINGS ARE:											
Continuous slot											
Louvered shutter											
From ft to ft From ft to											
GRAVEL PACK INTERVALS: From 290 ft. to											
From ft. to ft. From ft. to ft											
6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other  Grout Intervals: From											
		est source of possible conta	mination:	M. Frank Angeliane	. Ib. 10, 14	····· kb.j	riom		. 11. 10	······································	
	Septic ta		es Pit privy	Livestock		Insecticide		Oth	er (specify	below)	
	Sewer lin	nes	Sewage lagoon	☐ Fuel stora☐ Fertilizer		☐ Abandoned☐ Oil well/ga		l None	ż		
Direc	tion from	n well	····			ell					
FROM	TO	LITHOLOG	IC LOG	FROM	ТО	LITHO, LO	OG (cont.	) <u>or</u> PLU	GGING I	NTERVALS	
2	25	Top soil	······································	-							
25	25 155	Silty tan clay & limestor Black shale & limestone							· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
155	187	Gray shale & tan rock	·		·; ,				<del> </del>		
187	266	Fine clay			· · · · · · · · · · · · · · · · · · ·						
266	285	White clay w/ sandston	e streaks							<del>,,</del>	
285	290	Fire clay								· · · · · · · · · · · · · · · · · · ·	
										**************************************	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was   ✓ constructed, ☐ reconstructed, or ☐ plugged											
under my jurisdiction and was completed on (mo/day/year) .2-28-13 and this record is true to the best of my knowledge and belief											
Kansas Water Well Contractor's License No. 134 This Water Well Record was completed on (mo/day/year) 5-30-13											
under the business name of Rosencrantz-Bemis by (signature)  INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies											
(white, blue	ie, pink) to	Kansas Depar tment of Health	PLEASE PRESS FIRML and E nvironment Bureau	Y and <u>PRINT</u> cl	early. Ple	ease fill in blanks	and check	the correct	answers. S	Send three copies	
1 crephone	/03-490-	3324. Sen a one copy to WAII	ER WELL OWNER and	r etain one for	your reco	rds. Include fee	of \$5.00 f	or each c <u>or</u>	nstructed v	vell. Vi sit us at	
The first way knieks gov water weit/index.ntmi.											
KSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy											