WATE	R WEI	LL RECORD	Form W	WC-5	D	vivision of Wate	er Resources App. N	22437	
			Fraction	WC-3		ion Number	Township No.		
County: Edwards				2 1/4 SE !		35	T 24 S	Range Number	
								R 18 □E ☑W	
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here							g System (GPS) in		
·					Lau	.uae:	• • • • • • • • • • • • • • • • • • • •	(in decimal degrees)	
1 South, 1/4 West of Lewis						gituae:	• • • • • • • • • • • • • • • • • • • •	(in decimal degrees)	
						ation:	4 🗔 🗀 🖂		
2 WATER WELL OWNER: Bruce Gatterman						Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27 Collection Method:			
RR#, Street Address, Box #: P O Box 32						GPS unit (Make/Model:)			
G'a Cra ZID C 1						☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey			
City, State, ZIP Code : Larned, KS 67550						Est. Accuracy: \square <3 m, \square 3-5 m, \square 5-15 m, \square >15 m			
3 LOCATE WELL									
WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 135 ft.									
SEC	SECTION BOX: Depth(s) Groundwater Encountered (1)								
	SECTION BOX: Depth(s) Groundwater Encountered (1)								
	Pump test data: Well water was 72								
EST. YIELD. 895gpm. Well water was 76									
	w Bore Hole Diameter 30 in. to .135 ft., and								
" _	WELL WATER TO BE USED AS: Public water supply Geothermal Injection well								
Domostic D Feedlet D 0:15-14									
SW W Domestic Feedlot Oli field water supply Dewatering Other (Specify below) SW W Domestic Feedlot Oli field water supply Dewatering Other (Specify below) SW W Domestic Feedlot Domestic Domestic									
	Was a chemical/bacteriological comple submitted to Denortment?								
	Was a chemical/bacteriological sample submitted to Department? Yes V No If yes mo/day/yr sample was submitted								
i jes, moreaj, ji sampie was suomitted									
water went distincted: W res \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \									
5 TYPE OF CASING USED: Steel V PVC Other									
CASING JOINTS: 🗹 Glued 🔲 Clamped 🗍 Welded 🦳 Threaded									
Casing diameter .16									
Casing height above land surface. 18 in., Weight Sch.40 lbs./ft., Wall thickness or gauge No.									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
☐ Steel ☐ Stainless Steel ☑ PVC ☐ Other (Specify)									
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:									
Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)									
Louvered shutter Key punched Wire wrapped Saw cut Other (specify)									
SCREEN-PERFORATED INTERVALS: From 135 ft. to 65 ft., From ft. to ft.									
Fromft. toft. Fromft to ft									
GRAVEL PACK INTERVALS: From 135 ft. to 20 ft., From ft. to ft.									
From									
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From ft. to ft., From 20 ft. to ft., From ft. to ft.									
What is the nearest source of possible contamination:									
☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☑ Other (specify below)									
	Sewer lin			Fuel stora		☐ Abandoned		•	
		ht sewer lines		☐ Fertilizer		Oil well/ga			
		n well			from w				
FROM	TO	LITHOLOG	IC LOG	FROM	TO	LITHO. LO	OG (cont.) <u>or</u> PLU	GGING INTERVALS	
0	3	Sandy top soil		102	105		sand- HARD		
3	13	Tan & gray clay		105	117		vel- small w/ a fo	ew small	
13.	22	Fine sand					cemented sand		
22	52	Sand & gravel- small to	med	117	120	Grav clav	Join Orkou Caria		
52	53	Cemented sand		120	130.5		vel & broken roc	-k	
53	58	Fine sand & clay		130.5	133		iver a broken roc		
58	75	Sand & gravel- clea, me	ad Joses	130.5		Tan clav			
75			u, 10035		134	Dakota drif			
95	95	Tan clay		134	135	Grav shale			
100 102 Sand & gravel									
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) 4.22-15 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) 5-28-15 under the business name of Rosencrantz-Bemis Ent Inc. by (signature)									
under the	e busines	is name ofRosencrantz	- Bemis Ent Inc		by (s	signature) 🗢	Long au.	<i></i>	
INSTRUC	TIONS:	Use typewriter or ball point pen.	PLEASE PRESS FIRMLY	and PRINT c	learly. Ple	ase fill in blanks	and check the correct :	answers Send one convito	
Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Toneka, Kansas 66612-1367									
Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at									