WATE	R WE	LL RECORD	Form W	/WC-5	ī	Division of Wate	r Resources App. N	20150387	
		OF WATER WELL:	Fraction			tion Number	Township No.	Range Number	
	nty: Ba		1/4 NW 1/4 SE	E 1/4 NE 1/2		36	T 20 S	R 12 □E ☑W	
		Address of Well Location; i				pal Positioning			
	from nearest town or intersection: If at owner's address, check here .					Global Positioning System (GPS) information: Latitude:			
	5 1/4 South, 1/4 West of Ellinwood					Longitude: (in decimal degrees)			
5 174 Count, 174 West of Emiliwood						Elevation:			
2 WATER WELLOWNER						Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27			
2 WATER WELL OWNER: K & N Petroleum					Coll	Collection Method:			
	RR#, Street Address, Box #: 1105 Walnut					GPS unit (Make/Model:)			
City, State, ZIP Code : Great Bend, KS 67530						☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey			
Est. Accuracy: □ <3 m, □ 3-5 m, □ 5-15 m, □ >15 m								5-15 m,	
-	WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 100								
1	TION BO	BOX: Depth(s) Groundwater Encountered (1)							
	Depth(s) Groundwater Encountered (1)								
	Pump test data: Well water was								
w N	Bore Hole Diameter 10								
'' 	WELL WATER TO BE USED AS: Public water supply Geothermal Injection well								
	SWSE Domestic								
3	~ :	Irrigation Industrial Domestic-lawn & garden Monitoring well							
		Was a chemical/bacteriological sample submitted to Department? Yes No							
	S If yes, mo/day/yr sample was submitted								
Water well disinfected? ✓ Yes □ No									
5 TYPE OF CASING USED: Steel PVC Other									
CASING JOINTS: Glued Clamped Welded Threaded									
Casing diameter 5									
Casing height above land surface18 in., Weight SDR 26 lbs./ft., Wall thickness or gauge No TYPE OF SCREEN OR PERFORATION MATERIAL:									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)									
SCREEN OR PERFORATION OPENINGS ARE:									
Continuous slot Mill slot									
Louvered shutter Key punched Wire wrapped Saw cut Other (specify)									
SCREEN-PERFORATED INTERVALS: From 100 ft. to 80 ft., From ft. to ft.									
From that the first the fi									
GRAVEL PACK INTERVALS: From									
From									
o GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From ft. to ft., From 20 ft. to 0 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 storag		☐ Abandoned	water well		
☐ Watertight sewer lines ☐ Seepage pit ☐ Fertilizer storage ☐ Oil well/gas well None Direction from well Distance from well									
FROM	TO	LITHOLOGI	CLOC		from w	ell		• • • • • • • • • • • • • • • • • • • •	
	3		C LOG	FROM	TO	LITHO, LO	G (cont.) or PLU	GGING INTERVALS	
0 3	6	Sandy top soil			·				
6	16	Soft, sandy clay							
16	33	Hard, sticky, brown clay							
		Soft, sandy clay							
33	41	Yellowish & brown clay							
41	47	Gravel- small, med, & coarse							
47	62	Gravel- small & med w/ brown clay							
62	72	Brown clay							
72	100	Gravel- small, med, coar	se, & clean						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ✓ constructed, ☐ reconstructed, or ☐ plugged									
under my jurisdiction and was completed on (mo/day/vear) 11-10-10 and this record is true to the heat of my linearly and this record is true to the heat of my linearly and this record is true to the heat of my linearly and this record is true to the heat of my linearly and this record is true to the heat of my linearly and this record is true to the heat of my linearly and this record is true to the heat of my linearly and this record is true to the heat of my linearly and this record is true to the heat of my linearly and this record is true to the heat of my linearly and the heat of my linearly and this record is true to the heat of my linearly and my linearly and the heat of my linearly and									
National Water Well Contractor's License No. 134 This Water Well Record was completed on (mg/d-1/2) 11.10.15									
under the business name of Rosencrantz- Bemis Ent Inc 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 one copy to									
Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, 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									
			http://www.kdheks.gov/	m one for your r	ecoras.	include fee of \$5.	UU for each constructe	d well. Visit us at	
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