WATE	R WE	LL RECORD	Form W	WC-5	Division of Wate	r Resources App. N	20150261	
		OF WATER WELL:	Fraction	******	Section Number	Township No.	Range Number	
	nty: Sta		14 SE 14 NE	1/4 SW 1/4	20	T 21 S	R 14 DE ZW	
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here					Global Positioning System (GPS) information:  Latitude: .38,20780			
<del>-</del>					Longitude: 098.88562 (in decimal degrees)			
2 1/4 North, 1/4 East of Radium					Longitude: 999.90	,,,,, <u>,</u> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(in decimal degrees)	
				Elevation:				
2 WA	TER W	ELL OWNER: Carmen	Schmitt Inc.	Collection Method:				
		Address, Box #: PO Box			GPS unit (Make/Model:)			
C'. C. J. ZID C. I					☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey			
City	, 51410, 2	Great B	end. KS 67530	Est. Accuracy: $\square$ <3 m, $\square$ 3-5 m, $\square$ 5-15 m, $\square$ >15 m				
3 LOCATE WELL								
	H AN "X	"IN 4 DEPTH OF	COMPLETED WEL	լ 100	ft.		:	
	TION BC	X: Depth(s) Ground	lwater Encountered	(1)	ft. (2)	ft (	(3) ft	
	N	WELL'S STATI	C WATER LEVEL	34 m	helow land surface t	measured on mo/d	(3) ft. lay/yr7-13-15:	
		Pump	test data: Well water	r was	ft after	hours num	ping gpm	
'		ECT VIELD N	Δ com Well water	was	f often	hours puin	ping gpm	
	V   N	E ESI. HELD.JW	eter 10in. to	r was 1∩∩		nours pum	ping gpm	
W								
		·	TO BE USED AS:				Injection well	
SV	s ـــ الخر v						Other (Specify below)	
		☐ Irrigation	Industrial	Domestic-law	n & garden 🔲 Mo	onitoring well	•••••	
<u> </u>			bacteriological sample			Yes 🗹 No		
	S	If yes, mo/	day/yr sample was sub	mitted				
	1 mile	Water well disin	fected? 🔽 Yes 🗌	No				
5 TVDI	FOFC	ASING USED:	D DVC D	Other				
		rs: ☑ Glued ☐ Clan	V I VC U			•••••	A A A A A A A A A A A A A A A A A A A	
CASIN	G JOIN	13: V Glued   Clari	ipeu	I fireaded				
Casin	g diamei	er .5 in. to .100	II., Diameter	III. I	0 II., D	iameter	in. to it.	
Casin	g neigni	above land surface18	in., weight	.SPIN-20	$los./\pi.$ , wall thic	kness or gauge N	0	
		EEN OR PERFORATION					T MANAGEMENT OF THE PROPERTY O	
_	Steel	Stainless Steel	<b>Z</b> PVC	, L	Other (Specify)	· · · · · · · · · · · · · · · · · · ·		
_	Brass	Galvanized Steel		ole)				
		ERFORATION OPENING		7				
Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)								
☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☑ Saw cut ☐ Other (specify)								
SCREE	N-PERI							
			From	tt. to	ft., From	tt.	to ft.	
	GRAV.	EL PACK INTERVALS:	From!!!	tt. to	tt., From	ft.	to ft.	
							to ft.	
6 GRO	UT MA	From Neat ceme	nt	Benton	ite 🔲 Other			
Grout In	tervals:	From ft. to	ft., From	1 . <del>2</del> .0 f	t. to ft.,	From	ft. toft.	
		est source of possible conta				,		
	Septic ta			Livestock p			ner (specify below)	
	Sewer lin			Fuel storage				
		ht sewer lines   Seepage p		Fertilizer sto				
		n well			rom well			
FROM	TO	LITHOLOG	IC LOG	FROM	TO LITHO. LO	OG (cont.) <u>or</u> PLU	JGGING INTERVALS	
0	3	Sandy top soil						
3	16	Gray clay						
16	35	Sand						
35	69	Sand & gravel- small to	med					
	74	The state of the s	meu	<del>                                     </del>				
69		Tan clay		<del> </del>				
74	100	Sand & gravel- small to	mea					
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) .713-15 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) .7-17-15								
under the business name of Rosencrantz-Bemis Ent Inc by (signature)								
INSTRUC	CTIONS	Use typewriter or ball point pen	PLEASE PRESS FIRMLY	and PRINT cle	arly Please fill in blanks	and check the correct	answers Send one convito	
	Kansas Do	partment of Health and Environment	nent, Bureau of Water, Geo	logy Section, 10	00 SW Jackson St., Suite	420, Topeka, Kansa	s 66612-1367.	
Telepho	ne 785-296	-5524. Send one copy to WATE	R WELL OWNER and reta	in one for your r	ecords. Include fee of \$	5.00 for each construc	ted well. Visit us at	
http://www.kdheks.gov/waterwell/index.html								

Reply to: (785) 296-3565 FAX (785) 296-5509 Bureau of Water - Geology Section 1000 S. W. Jackson, Ste. 420 Topeka, KS 66612-1367



## ASSIGNMENT OF WATER WELL TO LANDOWNER

I, Cormen Schmiff of P.	D. Box 47 - Great Bened 145						
1	(Landowner's address)						
$\frac{67530}{}$ am the	landowner on which a water well is located in						
(City) (State) the SE quarter of the SE	$\frac{1}{2}$ quarter in Section $\frac{20}{2}$ , Township $\frac{21}{3}$ ,						
Range 14 EW in Statford	County, Kansas which is approximately						
Range 14 E(W) in Statford  [594] feet (north/south, and 2020) feet	east)west of the apparent SW section						
corner. The water well was drilled in	2015 (month/year).						
I hereby request that Covmen Schm. (Operator na	leave the water well,						
which was drilled by Temporary Water Permit # 20150261, unplugged, and I will							
assume all responsibility for the plugging of said water well in accordance with the requirements							
of the Kansas Department of Health and Environment	nent regulation K.A.R. 28-30-7.						
LANDOWNER:	OPERATOR:  Math Suppr						
$\frac{Comm Silmus}{\text{(Signature)}}$ (Date)	Mill John Mart Suchy Production Manager 7/30//						
(Signature) (Date)	(Signature) (Date)						
(Print)	By:						
IF ADDITIONAL LANDOWNER	COPY						
(Signature) (Date)							
	RECEIVED						
(Print)	AUG 03 2015						
WWC-7 R/Geology/WWC forms – standard/ db 10/25/2012	BUREAU OF WATER						