		RECORD		WWC-5			on of Water	26320				
				e in Well Use			rces App. No.	T	Well ID			
1 LOCATION OF WATER WELL: Fra County: Stafford				Fraction  4 4 NC 4				Township Numb		ge Number		
2 WELL OWNER: Last Name: First:						eet or Rural Address where well is located (if unknown, distance and						
Business: Schartz Foods Unlimited direction							n from nearest town or intersection): If at owner's address, check here:					
Address:	Address: 25610 W 69 I err Street							th, 1 1/2 West of Seward				
Address: City:		_	State: KS		4 1/4 NO	πn, 1	1/2 West o	r Seward				
3 LOCAT	Shawne			ZIP: 66226								
WITH '				IPLETED WELL: .		. ft.	5 Latitude	:	· · · · · · · · · · · · · · · · · · ·	(decimal degrees)		
i i	SECTION BOX:         Depth(s) Groundwater Encountered: 1)						t.   Longitude:					
	WELL'S STATIC WATER LEVEL: 28									83 🗆 NAD 27		
	below land surface, measured on (mo-day-yr)						3-29-19 GPS (unit make/model:					
NW above land surf				, measured on (mo-day-	yr)		(WAAS enabled?  Yes No)					
Pump test data: Well w				vater was 1	t.		☐ Land Survey ☐ Topographic Map					
l l l Well				s pumping gpm water was ft.			Online Mapper:					
SW SE after			hours pumping gpm									
	Estin			Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC				
S Bore Hole Diameter:			30 in. to 140 ft. and			Source: Land Survey GPS Topographic Map						
mile  in. to								] Other				
7 WELL WATER TO BE USED AS: 1. Domestic: 5 Depublic Water Supply: Well ID 10 DOWN Field Water Supply: Well ID												
	Omestic: 5. ☐ Public Water Supply: well ID ☐ Household 6. ☐ Dewatering: how many wells?											
1	Lawn & Garden  7. Aquifer Recharge: well ID				•••••••	11. Test Hole: well ID						
	☐ Livestock 8. ☐ Monitoring: well ID						12. Geothern	nal: how many bores	?	1		
	2. Irrigation 9. Environmental Remediation: well ID					•••	a) Closed Loop   Horizontal   Vertical					
3. ☐ Feedlot ☐ Air Sparge ☐ 4. ☐ Industrial ☐ Recovery ☐					xtraction b) Open Loop  Surface Discha				scharge 🔲	Inj. of Water		
			Recovery				13.  Other	(specify):	• • • • • • • • • • • • • • • • • • • •	•••••		
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:												
8 TYPE OF CASING USED: Clear Proc Clear												
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded												
Casing diameter 16 in to 140 ft., Diameter in to ft. Diameter in to ft.  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 ☐ 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												
SCREEN-PERFORATED INTERVALS: From 140 ft. to 60 ft., From ft. to ft. From ft. to ft. GRAVEL PACK INTERVALS: From 140 ft. to 20 ft., From ft. to ft.												
9 GROUT MATERIAL: Neat cement Committee Commit												
Grout intervals. From												
rearest source of possible contamination:												
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage ☐ Sewer Lines ☐ Cess Pool ☐ Sewage Logger ☐ First Storage												
			Cess Pool	☐ Sewage La	_		el Storage		ned Water	Well		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify) None.												
Direction from well?												
IU FROM	10	L	ITHOLOG	GIC LOG	FROM	T	TO LIT	HO. LOG (cont.) or	PLUGGIN	GINTERVALS		
0	2	Sandy top so	<u>oil</u>		58	77		nd & gravel				
6	6	Brown clay			77	81		en clay				
12	12	Sandy red cl	ay		81	86		nd & gravel				
19	19 26	Fine sand	-1		86 91	91		en clay				
26	37					11		Sand & gravel w/ white clay				
37	41	Sand Clay			111	14	10 Sai	nd & gravel				
41	50	Clay										
50												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
under my jurisdiction and was completed on (mo-day-year) 4-22-19 and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No 134												
Lansas wa	iter well Co	ntractor's Lice	nse No	1.134 This Wa	ter Well R	PCOTO	d was comple	sted on (mo dov ve	.a-\ 5_8	10		
under the o	usincss nan	IC OL INDSE	WALLET, C			Nions	ature S/V	7-1 m . / 1 // / /		- 1		
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 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.												
Visit us at har	<u>≅/www.kah</u> ek	s_20v/waterwell/n	ndex html	DOUTZ-1507. WAIN ONE (O	Water Well C KSA 82a-	1212	and retain one fo	я your records. Telepho		5524. <b>7/10/2015</b>		
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