			m WWC-5		vision of Water				
			hange in Well Use		ources App. No.	T	Well ID		
		VATER WELL:	Fraction		ction Number	Township Numbe			
County: Rice NW ½ NW ½ NE ½ NW ½ 22 T 21 S R 8 E									
2 WELL	2 WELL OWNER: Last Name: Black forms + Farms, LLC. Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:								
Business: Address:		st MAIN	,-	direction from	nearest town or int	ersection): If at owner'	s address, check here:		
Address	117 446	24 h/WIN		1/2 mile E d	of Sterling, Ks	on Avenue V			
City:	Sterling	State: I	Ks. ZIP: 67579		3 ,				
3 LOCAT				60 0		20.04654			
WITH "	X" IN		DEPTH OF COMPLETED WELL:60 ft			38.21651	(decimal deg	grees)	
SECTIO	N BOX:		Depth(s) Groundwater Encountered: 1)			Longitude:			
1	1						□ NAD 83 ■ NAI	.D 27	
		below land sur	WELL'S STATIC WATER LEVEL: 10			r Latitude/Longitude:	armin 62S		
NW	, ,		above land surface, measured on (mo-day-yr)			(unit make/model:G	V N-))	
NW	NE		Pump test data: Well water was ft.			(WAAS enabled? ☐ Yes ■ No) ☐ Land Survey ■ Topographic Map			
w	E	after hours pumping gpm			Online Mapper:				
" 1	·		Well water was ft.			ic Mapper.			
SW	SE	after hours pumping gpm			(FI	1642			
		Estimated Yield:	Estimated Yield:gpm			6 Elevation: 1642			
	S		Bore Hole Diameter:16 in. to60 ft. and			Source: ☐ Land Survey ■ GPS ☐ Topographic Map ☐ Other			
1 n			in. to	ft.	_	Utner	***************************************	• • • • • •	
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Dublic Water Supply: well ID									
1. Domestic:			Water Supply: well ID						
Housel		6. ☐ Dewat	tering: how many wells?						
			7. ☐ Aquifer Recharge: well ID						
	2. ☐ Irrigation 9. Environmental Remediation: well 1D 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor E				 a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 				
4. Industrial Recovery Injection				Extraction					
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:									
Water well disinfected? ■ Yes □ No									
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other									
Casing diameter in. to 75 ft., Diameter in. to ft., Diameter in. to ft.									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
TYPE OF SCREEN OR PERFORATION MATERIAL: Steel									
☐ 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 □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)									
SCREEN-PERFORATED INTERVALS: From .40 ft. to .60 ft., From ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other.									
Grout Intervals: From 20 ft. to 0 ft., From ft. to ft. ft. ft. ft.									
Nearest source of possible contamination:									
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage									
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well									
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well									
■ Other (Specify) .Open field									
10 FROM	TO		LOGIC LOG	FROM	TO LI	THO. LOG (cont.) or I	LUGGING INTERV	ALS	
		Top soil		4					
		Brown clay							
		Med. sand & grave							
		Small fine sand							
		Small-fine sand & t	tan clay mix						
42	65	Small-fine sand							
				Notes:					
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) 10/6/2017 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 (modday-year) .10/10/2017. under the business name of Rosencrantz-Bemis Ent. Signature									
under the bu	isiness nam	e of Kosengrantz-J	Bemis Ent	Sis	enature	4			
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 http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015									