WATER			WWC-5		ision of Water	24,128	*** ** ***	Well #4	
			ge in Well Use Fraction		urces App. No.	1 - 1: > 1	Well ID	\	
		ATER WELL:	1	tion Number					
County: Rice ¼ SE ¼ NE ¼ 29 T 21 S R 9 ☐ E ■ V									
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and									
Business: Diamond Land LLC direction from nearest town or intersection): If at owner's address, che								check here:	
Address: PO Box 47 Address: 2 1/2 South, 1 West of Alden									
City: Great Bend State: KS ZIP: 67530									
3 LOCATI			T						
WITH "Y" IN 4 DEPTH OF COMPLETED WELL:49.					·				
	SECTION ROX. Depth(s) Groundwater Encountered: 1)					Longitude:			
2)					Horizontal Datum: WGS 84 NAD 83 NAD 27				
below land surface, measured on (mo-day-yr)6-					Source for Latitude/Longitude: GPS (unit make/model:)				
above land surface, measured on (vr)	r)				
NW	Dumm test date: Well water was					☐ Land Survey ☐ Topographic Map			
w						Online Mapper:			
-	'		Well water was ft.						
SW	SE	after hours pumping gpm			6 Florestion: A Ground Lovel G TOC				
		Estimated Yield:5.78gpm Bore Hole Diameter:30 in. to46 ft. and			6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map				
		Bore Hole Diameter:	30 in. to40	ft. and					
mile in. to ft.									
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID									
	Domestic: 5. ☐ Public Water Supply: well ID				10. Oil Field Water Supply: lease				
☐ Lawn & Garden									
I	Livestock 8. Monitoring: well ID					12. Geothermal: how many bores?			
	2. Irrigation 9. Environmental Remediation: well ID					a) Closed Loop Horizontal Vertical			
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extract					b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
4. 🗌 Industr	ial	☐ Recover				r (specify):			
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 JOINTS: Glued Clamped Welded Threaded									
Casing diameter 16 in to 46 ft Diameter in to ft Diameter in to ft									
Casing diameter									
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 ☐ Key Punched ☐ Wire Wrapped ■ Saw Cut ☐ None (Open Hole)									
SCREEN-PERFORATED INTERVALS: From									
GRAVEL PACK INTERVALS: From									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From									
Nearest source of possible contamination: □ Septic Tank □ Lateral Lines □ Pit Privy □ Livestock Pens □ Insecticide Storage									
Sewer		☐ Cess Pool							
☐ 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) None									
Direction from well?									
10 FROM	TO	LITHOLO	OGIC LOG	FROM	TO L	ITHO. LOG (cont.) or	r PLUGGIN	IG INTERVALS	
0		Sandy top soil							
3		Soft sandy clay							
6		Sandy gray clay							
13	37	Sand & gravel- med	clean coarse						
37	38	Tan clay streak							
38	45	Sand & gravel- small	ll med clean coarse						
45	46	Sand & gravel- fine		Notes:	· · · · · · · · · · · · · · · · · · ·				
				1					
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) 7-5-18									
Kansas Water Well Contractor's License No									
under the business name of Rosencrantz- Bemis Ent inc Signature Signature A444 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,									
Mail I white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GW1S 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.									
						noi your records. Telepi	Revise	d 7/10/2015	
Visit us at http://www.kdheks.gov/waterweif/index.html KSA 82a-1212 Revised 7/10/2015									