	WELL R				sion of Water	39362-42296			
	Record _				urces App. No.		Well ID		
		ATER WELL: Fraction		I	tion Number	Township Number		ge Number	
County: Harvey SW ¼ SW ¼ NW ¼ NE ¼ 19 T 22 S R 2 □ E									
2 WELL OWNER: Street or Rural Address where well is located (if unknown, distance and Kylc V! Robin K Schwag. Myron O! Barbara Stuckydirection from nearest town or intersection): If at owner's address, check here:									
	Robin K Sc	chrag Myron O	Barbara Stucky	irection from r	earest town or in	tersection): If at owner's	address, c	heck here: 🔲 📗	
	Halstea	d.Rd 1809 Car	•			er Park Rd. 1S 1/2E			
M+. Rio	lge, Ks	67107 Mt. Rid	se, KS 67107						
3 LOCATI				00	T	20.40774			
WITH "		4 DEPTH OF COM			5 Latitude: 38.12771 (decimal degrees)				
SECTION BOX: Depth(s) Groundwater Encountered: 1)					Longitude:097,58171(decimal degrees)				
N	1	2) ft. 3)			tal Datum: WGS 84	□ NAD 8	33 I NAD 27		
	WELL'S STATIC WATER LEVEL:ft. below land surface, measured on (mo-day-yr). 5/15/20					Source for Latitude/Longitude: GPS (unit make/model:Garmin 62S)			
,						(WAAS enabled? ☐ Yes ■ No)			
NW	NWNE Labove land surface, measured on (mo-day-yr)					☐ Land Survey ■ Topographic Map			
w - -	E after hours pumping gpm					Online Mapper:			
		Well water was ft.							
sw	SE	after hours pumping gpm			C Planting and T TOC				
		Estimated Yield:		6 Elevation:					
1	S	Bore Hole Diameter:	ft. and	und -					
1 mile in. to ft.									
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID									
1. Domestic:									
	☐ Household 6. ☐ Dewatering: how many wells?								
Livesto			7. Aquifer Recharge: well ID						
						ed Loop Horizontal			
3. Feedlo		☐ Air Sparge							
↑4. 📮 Industr	ial	☐ Recovery	☐ Injection		13. 🗌 Othe	er (specify):			
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:									
Water well disinfected? ■ Yes □ No									
			Other	CASIN	JG IOINTS:	■ Glued □ Clamped	□ Welder	1 D Threaded	
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded									
Casing diameter 16 in to 55 ft., Diameter in to ft., Diameter in t									
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 .55 ft. to .70 ft., From .70 ft. to .80 ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From80 ft. to20 ft., From ft. to ft., From ft. o ft.									
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 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 - open field									
Direction from well?									
10 FROM	TO	LITHOLOG		FROM		ITHO. LOG (cont.) or I	PLUGGIN	G INTERVALS	
0		Top soil				reen shale			
3		Brown clay							
22		Tan clay - soft	TWO IS MINISTER TO A STATE OF THE STATE OF T	77.		7/811			
30		Tan clay		- "-					
43		Fine-small sand							
58		Small sand							
64		Cemented sand	Notes:	Votes:					
65									
69 73 Reddish tan clay/weathered shale									
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) .5-15-20.18 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 (mo-day-year) 5-31-2018									
under the business name of Rosengrantz-Bernis Ent. Signature Signature Signature									
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	Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015								