		RECORD	Form V				ision of Wat						
✓ Original Record ☐ Correction ☐ Change in Well Use					Resources App. No.				Well ID				
1 LOCATION OF WATER WELL: Fraction						Section Number Township Number Range Number							
County: Hodgeman SW¼ SE¼ SE¼ SW¼ 11 T 22 S R 26 DE Z 2 WELL OWNER: Last Name: Stapleton First: Maxine Street or Rural Address where well is located (if unknown, distance and													
		Last Name: Sta	pleton	First: IVI									
Business:	V 202 Rd				rection from nearest town or intersection): If at owner's address, check here:								
Address:	1277101	V ZOZ Ma			1	56 & 205 Rd N 5 Miles, West 3/4 Mile							
City:	1	State: KS	ZIP: <b>6</b> 7										
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL: 420 ft. 5 Latitude: 38.14686 (decimal degrees)													
	WITH "X" IN SECTION BOX:  Depth(s) Groundwater Encountered: 1)							Oft. Longitude: 100.14596 (decimal degrees)					
	N N	2)	ft. 3	3)	ft., or 4) [	Dry Well			WGS 84 □ NA		NAD 27		
	WELL'S STATIC WATER LEVEL:						Sour		atitude/Longitude				
	below land surface, measured on (mo-day-)												
NW	above land surface, measured on (mo-day-y-						) (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map						
w	1 Our Laurenceine						m						
	Well water was ft						Chaine Mapper						
sw	after hours pumpingg						( Fl-	. 4 *	2482 0		I TOC		
L_L_X	لـــــــا	Estimated Y	Estimated Yield:40gpm				6 Elevation: 2482						
1	S	Bore Hole l	Bore Hole Diameter: 9 in. to 420				ft. and Source   Land Survey   Grs   Top				phographic Map		
1 III. W III. W III.													
7 WELL WATER TO BE USED AS: 1. Domestic: 5.  Public Water Supply: well ID													
☐ Household 6. ☐ Dewatering: how many wells?													
	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID												
☑ Livest					)				l: how many bore				
	2. ☐ Irrigation 9. Environmental Remediation: well ID												
	3. Feedlot Soil Vapor Ex						b) Open Loop  Surface Discharge Inj. of Water  13. Other (specify):						
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☑ No If yes, date sample was submitted:													
Water well disinfected? Yes No  CASING IOINTS: Global Glomand G Welded A Threeded  CASING IOINTS: Global G Clomand G Welded A Threeded													
Casing diameter 5 in to 420 ft Diameter in to ft Diameter in to ft Diameter in to													
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in to ft., Diameter in to ft., Diameter in to ft. Diameter in to SDR 17.  Casing height above land surface 24 in Weight Ibs./ft. Wall thickness or gauge No. SDR 17.													
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)													
	nuous Slot								Other (Specify)	••••••			
SCREEN	DEDEUD VI	☐ Key Punc	ΔIS From	пе wrapp	eu 1213av	v Cut \B	none (Open i	noie)	A From	A to	Δ		
SCREEN-PERFORATED INTERVALS: From 320 ft. to 420 ft., From ft. to ft., From ft. to ft., From ft. to ft. From ft. to ft.										A			
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other													
Grout Intervals: From													
		ole contamin <u>a</u> ti		_		_			_				
☐ Septic			Lateral Line		Pit Privy		Livestock P			cide Storage			
Sewer			Cess Pool		Sewage Lag		Fuel Storage			oned Water			
□ Watertight Sewer Lines     □ Seepage Pit     □ Feedyard     □ Fertilizer Storage     □ Oil Well/Gas Well       □ Other (Specify)     □ Other (Specify)													
Direction from well? ft.													
10 FROM	TO		ITHOLOG			FROM	TO		O. LOG (cont.) or		G INTERVALS		
									Istone Streaks				
0	20 Top Soil, Tan Clay, Fine Med Sand				200	220	Dark Gray Clay w/Hard Rock Layers						
20	40		ine, Med Sand, w/ Tan Clay Layers			220	240		Dark Grey Clay w/Gray Sandstone				
40	60	Blue Shale				240	300		Light Gray Clay w/Gray Sandstone				
60	150		lue Shale w/Tan Rock Layers			300 425	425	Gray Sandstone Gray Sandstone w/Blue Shale Layers					
150	160	Gray Clay					440	<u>ray</u>	Sandstone W/I	oiue Shale	; Layers		
160	190												
Gray Sandstone Streaks 190 200 Rock,Blue Shale,Gray													
190	11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \( \bigcirc\) constructed, \( \bigcirc\) reconstructed, or \( \bigcirc\) plugged												
under my jurisdiction and was completed on (mo-day-year) .11/10/2013 and this record is true to the best of my knowledge and belief.													
Kansas Wa	ater Well Co	ntractor's Lic	ense No. الج	46	This Wa	ter Well Red	ord was co	mplete	ed on (mo-day-y	ear) .1.1/29	/2013		
under the business name of Nash Water Well Service, LLC													
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.  KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.													
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