	K WELL F		WWC-5		Division of Water						
	al Record				esources App.			Well ID			
1 LOCATION OF WATER WELL:			Fraction	Section Numb				ge Number			
	y: Reno		NW 1/4 NW 1/4 SW 1/						$\Box E \blacksquare W$		
		ast Name: Yust	First: Steven	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:				direction fro	m nearest town	or inte	rsection): If at owner	's address, c	heck here:		
Address: 103 S. Netherland Rd.				From 4th	From 4th & Netherland Rd. 3S (Illinois) 2W(Brownlee) 1/8N) 1/8N ESR		
City:	Sylvia	State: Ks.	ZIP: 67581				,	(,		
3 LOCAT											
WITH				PLETED WELL:65 ft.			5 Latitude: 38.01679 (decimal degrees)				
				Encountered: 1) ft. 3) ft., or 4) \(\square\) Dry Well			Longitude: 098.43478 (decimal degrees)				
N 2) ft				11011	Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ■ NAD 27						
)18 <u>Sour</u>	Source for Latitude/Longitude: GPS (unit make/model: Garmin 62S)						
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	NE		■ below land surface, measured on (mo-day-yr). 9/28/2 □ above land surface, measured on (mo-day-yr)								
Nw	NE	Pump test data: Well water was ft.			l l	☐ Land Survey ■ Topographic Map					
w	 		after hours pumping gpm			Online Mapper:					
	'		Well water was ft.								
SW	SE	after hours	. gpm	6 Elevation: 1770 ft. Ground Level TOC							
		Estimated Yield:									
1	S	Bore Hole Diameter:			Sour		Land Survey GPS Topographic Map				
1 mile in. to ft.											
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID											
1. Domestic							eld Water Supply: le				
			g: how many wells? echarge: well ID		11. Test Hole: well ID						
			g: well ID		12. Geothermal: how many bores?						
			al Remediation: well I		a) Closed Loop Horizontal Vertical						
3. ☐ Feedlot ☐ Air Sparge				,	b) Open Loop Surface Discharge Inj. of Water						
4. 🗌 Indust	trial	☐ Recovery			13. Other (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											
Casing height above land surface											
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 .45											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From 20 ft. to 0 ft., From ft. to ft. From ft. to ft.											
Nearest sou	irce of possib	le contamination:	, 1 tom	10.10	10, 1 1011		11. 10	11.			
■ Septic Tank											
☐ Sewer		☐ Cess Pool	☐ Sewage La	igoon	Fuel Storag	e	☐ Abando	ned Water V	Vell		
	tight Sewer Li				Fertilizer S	torage	□ Oil Wel	l/Gas Well			
Other (Specify)											
Direction from well? .west Distance from well? .150' ft. 10 FROM TO LITHOLOGIC LOG FROM TO LITHOLOG (cont.) or PLUGGING INTERVAL									DITEDIVALO		
10 FROM 0	TO		SIC LUG	FROM	TO	LII	HO. LOG (cont.) or	PLUGGIN(INTERVALS		
5		Sandy top soil				-					
12		Tan clay	. 70/20			-					
		Tan clay-fine sand mix				-					
50		Tan clay small-med sa		-							
60	68	Med-fine sand, w/pcs	of tan clay			-					
				-							
	Notes:										
	-			4							
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) .9/28/2018 and this record is true to the best of my knowledge and belief.											
Kansas Wa	ater Well Co	ntractor's License No. 1	34 This W	ater Well F	ecord was co	mole	ted on (mo-day-ve	ar) .9/28/2	Q1.8		
Kansas Water Well Contractor's License No. 134 This Water Well Record was completed on (mo-day-year) 9/28/2018 under the business name of Rosencrantz-Bemis Ent. 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,											
		t., Suite 420, Topeka, Kansas	66612-1367. Mail one to			one fo	r your records. Telepho				
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015									7/10/2015		