		RECORD		VWC-5 Division of Water									
			e in Well Use				App. No.		Well ID	<u> </u>			
1 LOCATION OF WATER WELL:			Fraction			Number	Township Numb		nge Number				
					NW 1/4 SW 1/4		11		T 23 S		1 🗆 E 🗷 W		
							Street or Rural Address where well is located (if unknown, distance and						
Address: 15175 SF 235 Rd							lirection from nearest town or intersection): If at owner's address, check here:						
Address:						H and Bel	font Rd	I N. 2 M	iles, W. 1 Mile, N	W. 3/4 Mil	е		
City: Kinsley State: KS ZIP: 67547													
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:							ft. 5	Latitud	e: 38.054	10	(decimal degrees)		
WITH "X" IN SECTION BOX: Depth(s) Groundwater Encountered: 1)10							5 ft. Longitude: 99.67843 (decimal degrees)						
2) ft. 3)					ft., or 4) [	Dry Well		Datum: WGS 84 NAD 83 NAD 27					
WELL'S STATIC WATER L					EL:9	Ŭ ft. → 5/14/20-		Source for Latitude/Longitude:					
								GPS (unit make/model:)					
X NW NE   □ above land surface, Pump test data: Well w								(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map			40)		
w					☐ Colline Mapper:								
					ater was ft.								
3₩	1.35.	after	pumping gpm				6 Elevation: 2292 ft. Ground Level TOC						
	Estimated Yield: 35.				gpm 9 in. to 200 ft. and			Source: Land Survey GPS Topographic Map					
					ı. w <del></del> ı. to			Other KOLAR					
7 WELL	WATER T	O BE USED											
1. Domestic: 5. Public Water Supply: well ID									ease				
	☐ Household 6. ☐ Dewatering:				any wells?		. 11.	. Test Hol	e: well ID				
· —	☐ Lawn & Garden 7. ☐ Aquifer Re									Geotechnica	d		
2. Irrigat	<ul><li>✓ Livestock</li><li>2. ☐ Irrigation</li><li>8. ☐ Monitoring: well ID</li><li>9. Environmental Remediation</li></ul>												
3. Feedle					ation: wen it ] Soil Vapor l		•						
4. Industrial Recovery					Injection	DAG GC HOII	13.	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													
8 TYPE OF CASING USED: ☐ Steel ☑ PVC ☐ Other CASING IOINTS: ☐ Glued ☐ Clamped ☐ Welded ☑ Threaded													
Casing diameter 5 in to 200 ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 24 in Weight Blos/ft. Wall thickness or gauge No. SDR17 Perf S													
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)													
☐ Louve	ered Shutter	☐ Key Puncl	hed □W	ire Wrann	ed 171 Sa	w Cut □	None (C	men Hole	•				
SCREEN-I	PERFORAT	TED INTERVA	ALS: From	160	. ft. to .200	ft., From		fl. to	fl., From	ft. to	ft.		
SCREEN-PERFORATED INTERVALS: From 160 ft. to 200 ft., From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 20 ft. to 200 ft., From ft. to ft., From ft. to ft.													
9 GROUT	MATERI	AL: Neat o	ement $\square$	Cement g	grout 🛮 🗷 Be	ntonite 🔲	Other			• • • • • • • • • • • • • • • • • • • •			
		ft. to ole contaminati		. ft., From	1	ft. to	ft.,	From	ft. to	ft.			
Septic			on: Lateral Line:	. г	☐ Pit Privy	г	7 Livest	ock Pens	□ Incocti	cide Storage			
Sewer			Cess Pool	_	☐ Sewage La		Fuel S			oned Water			
☐ Watert	ight Sewer L	ines 🔲 S	Seepage Pit		☐ Feedyard			zer Storag		ll/Gas Well			
Other (Specify)													
Direction from well?				Dis	tance from w					THO. LOG (cont.) or PLUGGING INTERVALS			
10 FROM 0	TO 25		ITHOLOG			FROM	TC	) LI	THO. LOG (cont.) or	PLUGGIN	G INTERVALS		
25	80	Top Soil, Tan					<del> </del>						
80	105	Gray Clay	lue Clay with Thin Rock Layers				+						
105	160		Gray Sandstone with Gray				1						
100	100	Clay Streaks					<del>                                     </del>						
160	200		Gray Sandstone										
200	220						Notes:						
and the state of t							SDR17 Perf SDR21 Plain						
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) .5/14/2014 and this record is true to the best of my knowledge and belief.													
under my j	urisdiction a	and was compl	eted on (m	io-day-ye 46	ar) .5/.14(20	!4 and	this re	cord is to	rue to the best of m	y knowled	ge and belief.		
Kansas Water Well Contractor's License No. 846 This Water Well Record was completed on (mo-day-year) 5/21/2014 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.													
		and Environment	, Bureau of W	ater, Geolo	ogy Section, 10	00 SW Jackso	n St., Sui	te 420, Top	oeka, Kansas 66612-136	7. Telephone			
Visit us at h	ttp://www.kdh	eks.gov/waterwel	l/index.html							KS	SA 82a-1212		