521	12841	I DECODD	Form W	WC 5	D' ' CW	<b>.</b>	20,608	
		LL RECORD	Fraction NO	WC-3	Section Number	Township No.	Range Number	
Coun		OF WATER WELL: Stafford	1/4 SW 1/4 Ne	₹ 1/4 SW 1/4			R 13 ☐E XW	
Street/Rural Address of Well Location; if unknown, distance & direction					Global Positioning	System (GPS) inf	ormation:	
from nearest town or intersection: If at owner's address, check here					Latitude: 37.989704 (in decimal degrees)  Longitude: -98.741255 (in decimal degrees)			
Approximately 1 mile east and 0.5 miles south of St. John.					Longitude:	-98.741255 Unknown	(in decimal degrees)	
					Elevation:	34, 🛛 NAD 83, 🗌		
2 WATER WELL OWNER: Spare Acres, Inc.					1 Collection Method:			
RR#, Street Address, Box #: 71 NE 20th St.					GPS unit (Make/Model: WAAS Digital Map/Photo, Topographic Map, Land Survey			
City, State, ZIP Code : St. John, KS 67576					Est. Accuracy:	< 3 m. 3-5 m.	C Map, Land Survey	
2 LOCATE WELL								
WITH AN "X" IN SECTION BOX:  4 DEPTH OF COMPLETED WELL 111  Depth(s) Groundwater Encountered (1) ft. (2) ft. (3) ft.								
SECT	SECTION BOX:  Depth(s) Groundwater Encountered (1) ft. (2) ft. (3)  WELL'S STATIC WATER LEVEL 25 ft. below land surface measured on mo/day/yr 04/24/15							
	Pump test data: Well water was _not checked ft. after hours pumping gg							
N	NW NE EST. YIELD gpm. Well water was ft. after hours pumping gpm							
w	Bore Hole Diameter 24 in. to 111 ft., and in. to ft.  WELL WATER TO BE USED AS: Public water supply Geothermal Injection well							
S	SW <sup>×</sup> -  SE   Domestic   Feedlot   Oil field water supply   Dewatering   Other (Specify below)   Irrigation   Industrial   Domestic-lawn & garden   Monitoring well							
<u> </u>	Was a chemical/bacteriological sample submitted to Department?  Yes No							
	S If yes, mo/day/yr sample was submitted							
5 TYPE OF CASING USED: Steel PVC Other								
CASING IOINTS: M Glued Clamped Welded Threaded Other (Specify)								
Casing diameter 16 in. to 60 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 12 in., Weight 19.75 lbs./ft., Wall thickness or gauge No616								
Casing height above land surface 12 in., weight 10.70 los./π., wall thickness or gauge No. 179PE OF SCREEN OR PERFORATION MATERIAL:								
Steel Stainless Steel PVC Other (Specify)								
Brass Galvanized Steel None used (open hole)								
SCREEN OR PERFORATION OPENINGS ARE:  Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)								
Louvered shutter Key punched Wire wrapped Saw cut Other (specify)								
Louvered shutter   Key punched   Wire wrapped   Saw cut   Other (specify)								
From 100 ft. to 110 ft., From tt. to 111 ft. From 111 ft.								
From ft. to					ft From		to ft.	
From ft. to ft., From ft. to ft.  6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From 2 ft. to 22 ft., From ft. to ft., From ft. to ft.								
What is the nearest source of possible contamination:								
Septic tank  Lateral lines  Pit privy  Livestock pens  Sewer lines  Cesspool  Sewage lagoon  Fuel storage  Abandoned water well								
Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well							None Known	
	tion from			·	from well	00 ( ) DY I	ICONIC INTERNAL C	
FROM 0	TO 3	LITHOLOG Topsoil	IC LOG	FROM	TO LITHO. L	OG (cont.) or PLU	JGGING INTERVALS	
3	14	Clay, brown, sandy		<del>                                     </del>				
14	21	Sand, fine to medium						
21	42	Sand & gravel, fine to				·	·	
42	111	Sand & gravel, fine to	medium					
				<del>                                     </del>				
		14 1 144 144 144 144 144 144 144 144 14		+		-		
				<del>                                     </del>				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 04/24/15 and this record is true to the best of my knowledge and belief.								
under my jurisdiction and was completed on (mo/day/year) 04/24/15 and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year) 05/07/15								
1		ell Contractor's License No ss name of Clarke	e Well & Equipmen	water well R t, Inc.	ecord was completed by (signature)	on (me/day/year)		
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367.								
(white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367.  Telephone 785-296-5522. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at								