WATE	R WEI	LL RECORD	Form W	WC-5	Division of Wate	r Resources App. No	27416	
		OF WATER WELL:	Fraction		Section Number		Range Number	
County: Reno		SW 1/4 SW 1/4 NE	14 NE 14	1		R 4 □E ☑W		
Street/Rural Address of Well Location; if unknown, distance & direction Global Positioning System (GPS) inform								
		town or intersection: If at o		Latitude: .37,99609 (in decimal degrees)				
From Hwy 50 & Worthington 2S 3/4E SSR					Longitude: 097.70564 (in decimal degrees)			
1 10	111 1 1 117 y \	Jo d. World milgion 20 3/4	L OOK	Elevation: 1470				
2 WATER WELLOWNER.					<u>Datum</u> : ☐ WGS 84, ☐ NAD 83, [] NAD 27			
2 WATER WELL OWNER: Delmar L. & Barbera F. Kincald Trust					Collection Method:			
RR#, Street Address, Box #: 75 w:110w6rook					GPS unit (Make/Model: Garmin 62S Digital Map/Photo, Topographic Map, Land Survey			
City, State, ZIP Code : Hutchinson, Ks. 67502 Digital Map/Photo, I Topogr							S-15 m	
Est. Accuracy:								
WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 37 ft.								
	SECTION BOX: Depth(s) Groundwater Encountered (1)							
	N WELL'S STATIC WATER LEVEL. 9ft. below land surface measured on mo/day/yr. 9/25/2014							
Pump test data: Well water wasft. after hours pumping gpm								
EST. YIELDgpm. Well water wasft. after hours pumping								
W Bore Hole Diameter 40in. to .37ft., andin. toft.								
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well								
Demostic Deadlet Doil field water gupply Dewystering Other (Specify below)								
SWSE Domestic Feediot On field water supply Dewatering Other (Specify below)								
Was a chemical/bacteriological sample submitted to Department? Yes No								
S If yes, mo/day/yr sample was submitted								
	1 mile	Water well disin	fected? Yes	No				
5 TVD	FOFC	SINC LISED. Steel	D DVC T	7thar				
5 TYPE OF CASING USED: Steel PVC Other Other								
CASING JOINTS: Glued Clamped Welded Threaded								
Casing diameter .16								
Casing height above land surface. 48 in., Weight SCH40 lbs./ft., Wall thickness or gauge No500								
TYPE 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 Z Saw cut Other (specify)								
SCREEN-PERFORATED INTERVALS: From								
			From:	ft. to	ft., From	ft, 1	to ft.	
	GRAV	EL PACK INTERVALS:						
			From	ft. to	ft., From	ft. 1	to ft.	
6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other								
I .	ntervals:	From .10 ft. to		1	ft. to ft.,	From	. ft. toft.	
What is the nearest source of possible contamination:								
☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☑ Other (specify below)								
☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well ☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well								
☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well ☐ Direction from well ☐ Distance from well Distance from well ☐ Distance from well ☐ Distance from well Di								
FROM	TO TO	LITHOLOG		FROM			GGING INTERVALS	
	+		IC LOG	TROM	TO LITTO, L	od (cont.) or PLU	OUTING THIERVALS	
0	2	Top soil		 				
2	6	Brown clay		 				
6	12	Medfine sand	······································	 -				
12	20	Med. sand & gravel		 				
20	22	Brown clay		ļ			TI,	
22	36	Fine-med. sand						
36	37	Green-bluish clay						
								
	<u> </u>							
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) .9/25/2014 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) .9/30/2014								
under the business name of Rosencrantz-Bemis Ent. by (signature)								
INSTRUCTIONS: Use ty pewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Depar treent of Health and E nvironment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 666 12-1367.								
(white, blue, pink) to Kansas Depar tment of Health and E nyironment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 666 12-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed, well. Vi sit us at								
		gov/waterwell/index.html.	OF HELE OWNER WILL	vani one ioi y	om 1000143. I licitude 10	2 01 40.00 101 Cacii C <u>u</u>	TO SIL US AL	
KSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy								