WATE	R WEI	L RECORD	Form W	WC-5	Division of Wate	r Resources App. N	47,906	
1 LOCATION OF WATER WELL:			Fraction		Section Number   Township No.   Range Number			
County: Reno		SE 1/4 SW 1/4 SE	1/. NF 1/.	5	T 24 S	R 5 DE WW		
Street/Rural Address of Well Location; if u								
				Global Positioning System (GPS) information:  Latitude: .37,99181				
	from nearest town or intersection: If at owner's address, check here .					Longitude: 097.88795 (in decimal degrees)		
From Hutchinson 2 South 3 East 1/2 North					Elevation: 1525			
<u> </u>								
2 WATER WELL OWNER: Lloyd Bontrager					Datum: WGS 84, NAD 83, NAD 27			
Eloyd Bollingol					Collection Method: ☐ GPS unit (Make/Model: Garmin cxs)			
C' C ZTD C 1					Digital Map/Photo, \( \infty \) Topographic Map, \( \square\) Land Survey			
City, State, ZIP Code : Haven, kansas 67543					Est. Accuracy: $\square < 3 \text{ m}$ , $\square 3-5 \text{ m}$ , $\square 5-15 \text{ m}$ , $\square > 15 \text{ m}$			
3 LOCATE WELL								
WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 61 ft.								
SEC	Depth(s) Groundwater Encountered (1)							
WELL STATIC WATER LEVEL							lay/yl.io i sola	
Pump test data: Well water was								
EST. YIELDgpm. Well water wasft. afterhours pumpinggpm								
W Bore Hole Diameter 40								
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well								
SWSE Domestic Feedlot Oil 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 disir	ifected? 📝 Yes 🔲	No				
# /DX/TA		CINIC LICED FIG.	1 FZ DX7C F1 (	Δ41				
5 TYPE OF CASING USED: Steel PVC Other								
CASING JOINTS: Glued Clamped Welded Threaded								
Casing diameter 16 in to 11 in to 12 in to 15 in to 16 in to 16 in to 17 in								
Casing height above land surface. 24 in., Weight SCH 40 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 Saw cut Other (specify)								
SCREEN-PERFORATED INTERVALS: From								
From								
GRAVEL PACK INTERVALS: From61 ft. to18 ft., From								
From ft. to ft., From ft. to ft.								
6 GROUT MATERIAL: Neat cement Cement grout Dentonite Other								
	itervals:	From 18 ft. to	o. 0 ft., From		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 None								
Direc	ction from	n well	***********	Distance	from well			
FROM	ТО	LITHOLOG	GIC LOG	FROM	TO LITHO. L	OG (cont.) or PLU	JGGING INTERVALS	
0	3	Top soil					***************************************	
3	7	Brown clay	STEEL MANUAL TO THE TOTAL TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TOTAL TO THE TOTAL TOTAL TOTAL TO THE TOTAL TOTAL TOTAL TOTAL TO THE TOTAL	tt				
7	35	Small to medium sand		<del> </del>			www.w	
			and the state of t	<del> </del>				
35	40	Tan clay		<del> </del>				
40	61	Small to medium sand		<del>                                     </del>				
				ļļ.				
				<u>                                     </u>				
	1	**************************************				**************************************		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION. This water well was \(\mathbb{Z}\) constructed, \(\mathbb{L}\) reconstructed, or \(\mathbb{L}\) plugged								
under my jurisdiction and was completed on (mo/day/year) 10.1.3013 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) 10-30-2012								
under the business name of Rosencrantz-Bemis Enterorise by (signature)								
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 Depar tment of Health and E nvironment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367.								
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								
http://www.kdheks.gov/waterwell/index.html.								
KSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy								

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