		RECORD		WWC-5			sion of Wate					
		Correction		ge in Well Use			irces App. N	$\overline{}$		Well ID	77 1	
				Fraction	1 1 1 2 1 2 2 1 2 2 1 2 2 2 2 2 2 2 2 2						ige Number	
County: Edwards ¼ NE ¼ NE						NE ¼ 31 T 26 S R 19 ☐ E ■ W  Street or Rural Address where well is located (if unknown, distance and						
E .		Last Name: Kat	<b>I</b> Z	First: Jim	Street or	Rura	al Address v	whe	re well is located (	if unknown,	, distance and	
Business: Address: PO Box 202							ction from nearest town or intersection): If at owner's address, check here:					
Address: 11 1/4 South, 1/2 West									Kinsley			
City:	Lewis		State: KS	ZIP: 67552	l							
	3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:88 ft							. ـ الد	37.74776	3	(4	
with '	WIII A III							iae:	e: 99.4323	/ የຮ	(decimal degrees)	
1	ON BOX:					11	Longi	tua	Datum: WGS 84	₩ NAD	83   NAD 27	
2)							Source for Latitude/Longitude:					
	below land surface, measured on (mo-day						-yr)11-19-18					
NW	above land surface, measured on (mo-da					yr) (WAAS enabled?  Yes No)						
1 1 1	Pump test data: Well water was											
w							Online Mapper:					
sw	Well water was											
		Estimated \	after hours pumping  Estimated Yield:gpm				6 Elevation:t. □ Ground I					
	S	Bore Hole	Bore Hole Diameter:10 in. to88			ft. and Source: L				Land Survey GPS Topographic Map		
1	mile		in. to ft.					Other				
7 WELL WATER TO BE USED AS:												
1. Domestic: 5. Public Water Supply: well ID												
_	☐ Household 6. ☐ Dewatering: how many wells?								: well ID			
1 =	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID								☐ Uncased ☐ C			
	Livestock 8. Monitoring: well ID						12. Geothermal: how many bores?					
	2. ☐ Irrigation 9. Environmental Remediation: well ID 5. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extraction						a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. Industrial Recovery Injection					13. Other (specify):					, 111j. 01 Water		
Was a chemical/bacteriological sample submitted to KDHE?  Yes No If yes, date sample was submitted:												
Was a chemical/bacteriological sample submitted to KDHE? Yes No 11 yes, date sample was submitted:												
8 TYPE OF CASING USED: Steel PVC Other												
Casing diameter 5 in to 88 ft Diameter in to ft Diameter in to ft												
Casing diameter												
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:												
	inuous Slot	☐ Mill Slot							Other (Specify)	•••••		
Louv	ered Shutter	Key Pund	ched ∐ V	Vire Wrapped	Saw Cut	⊔N	one (Open H	lole)	0 7			
SCREEN-	PERFORA	ED INTERV	ALS: From	m88 ft. to6	Ю tt., Fr	om	ft. to	)	ft., From	IL to	, It.	
				m88 ft. to2								
9 GROU	I MATEKI	AL:   Neat	cement [	Cement grout	Bentonite	Йo	ther	••••	Α 4-	Δ	• • • • • • • • • • • • • • • • • • • •	
Grout Intervals: From												
☐ Septic			Lateral Line	es 🔲 Pit Privy	,	П	Livestock Pe	ns.	☐ Insection	ide Storage	٠.	
Sewer			Cess Pool	☐ Sewage			Fuel Storage		☐ Abando			
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
■ Other (Specify)None												
							ft.					
10 FROM			<u>LITHOLO</u>	GIC LOG	FRO	M	ТО	LIT	HO. LOG (cont.) or	PLUGGIN	G INTERVALS	
0	2	Sandy top s	ioli								-	
2	17	Sandy clay	·									
17	88	Med gravel										
	-											
	1		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			$\dashv$		<del></del>	· · ·			
	<u> </u>		· · · · · · · · · · · · · · · · · · ·		<del>     </del>							
ļ	<del> </del>				Notes	:						
11 CONTRACTIONS OF LANDOWNERS CERTIFICATION OF THE STATE												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, plugged under my jurisdiction and was completed on (mo-day-year)11-19-18 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)												
under the business name of Rosencrantz- Bemis Ent Inc Signature Rosencrantz- Bemis Ent Inc												
Mai	l 1 white copy a	long with a fee o	f \$5.00 for ea	sch constructed well to:	Kansas Depar	ment	of Health and	Envi	ronment, Bureau of Wa	ater, GWTS	Section,	
100	00 SW Jackson	St., Suite 420, To	opeka, Kansa	s 66612-1367. Mail one	to Water Wel	i Own	er and retain o	ne fo	or your records. Teleph	one 785-296	-5524.	
		ks.gov/waterwell			KSA 82					Revised	d 7/10/2015	