			ge in Well Use			ion of Water rces App. No		 Well ID			
			Fraction			on Number			ange Number		
1 LOCATION OF WATER WELL: County: Reno			NE 1/4 NE 1/4 SW 1/2		Secu	23	T 26 S		9 □E ■W		
		Last Name: Murphy		Dural							
Business	Last Name. Willipmy		treet or Rural Address where well is located (if unknown, distance and irection from nearest town or intersection): If at owner's address, check here:								
Address:											
Address:	Address: 1303 E. 19th Avenue Address:					tty Prairie	Rd 4 1/2 W NSR	1/4 into fi	eld		
City:	Hutchins	on State: Ks	ZIP: 67502								
3 LOCAT	3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:90						37 772	10			
WITH "	WITH "X" IN SECTION POV. Depth(s) Groundwater Encountered: 1)										
SECTIO			.								
]	N		3) ft., or 4) ☐ Dry Well ATER LEVEL: 30 ft.			Horizontal Datum: WGS 84 NAD 83 NAD 27					
			ace, measured on (mo-day-yr)			Source for Latitude/Longitude: GPS (unit make/model:Garmin 62S)					
	'-		above land surface, measured on (mo-day-yr)			(WAAS enabled? ☐ Yes ■ No)					
NW	NE		water was								
	 	- 0 1	ter hours pumping gpm			☐ Land Survey ☐ Topographic Map ☐ Online Mapper:					
W	E		Well water was ft.								
SW	SE		r hours pumping gpm								
		Estimated Yield:	Estimated Yield:gpm			6 Elevation:ft. ■ Ground Level □ TOC					
	S	Bore Hole Diameter: .	Bore Hole Diameter:10 in. to90 ft. and			Source: Land Survey GPS Topographic Map					
1 1	mile		in, to	in. to ft.			☐ Other				
7 WELL WATER TO BE USED AS:											
1. Domestic			ater Supply: well ID			10. □ Oil	Field Water Supply:	ease			
L	☐ Household 6. ☐ Dewatering: how many wells?					11. Test Hole: well ID					
	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID					☐ Cased ☐ Uncased ☐ Geotechnical					
Livestock 8. Monitoring: well ID						12. Geothermal: how many bores?					
2. Irrigat	ion		al Remediation: well II			a) Closed Loop					
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex						b) Open Loop Surface Discharge Inj. of Water					
4. 🔲 Indust	rial	☐ Recovery		13. Other (specify):							
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:											
Water well disinfected? Yes \square No											
Water wen disinfected? ■ Yes ☐ No 8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other CASING JOINTS: ■ Glued ☐ Clamped ☐ Welded ☐ Threaded											
Casing diameter											
Casing height above land surface 24 in. Weight 160 lbs/ft. Wall thickness or gauge No. 214											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify) ☐ 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)											
SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From90 ft. to20 ft., From ft. to ft., From ft. to ft.											
ORAVED FACE INTERVALS. FIGHT											
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other											
Grout Intervals: From											
		Die contamination: Lateral Line	es		Пт:	vestock Pens		.11. 0			
☐ Septic☐ Sewer		☐ Cess Pool	Sewage La		_			cide Storag	•		
				igoon		uel Storage		oned Water			
☐ Other (Specify) .N/A											
10 FROM	TO	LITHOLO		FROM			ITHO. LOG (cont.) o		NGINTERVALS		
0	3	Top soil		1.401	-				· · · · · · · · · · · · · · · · · · ·		
3	15	Tan clay			_	-					
			of fine eard	 							
15	53	Tan clay w/few strks		+	+-				·		
53	70	Tan clay fine to small	sand mix		_						
70	90	Fine-small sand									
90		Red bed		1	L_						
				Notes:							
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) .2-13-20.18 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No134 This Water Well Record was completed on (mo-day-year) 2-20-20.18											
Kansas Wa	iter Well Co	ntractor's License No	134 This W	ater Well I	Recor	d was comi	oleted on (mo-day-y	ear) 2-20	-2018		
under the business name of Rosencrantz-Bemis Ent. Signature Datas Onder											
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section,											
1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.											
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015											