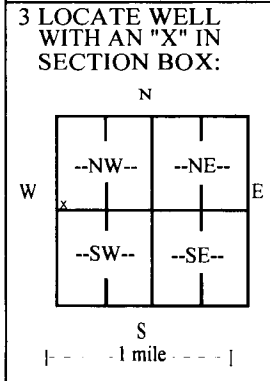


1 LOCATION OF WATER WELL: County: Kiowa	Fraction 1/4 SW 1/4 SW 1/4 NW 1/4	Section Number 13	Township No. T 27 S	Range Number R 19 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> Approximately 6 miles north and 3 miles west of Greensburg.		Global Positioning System (GPS) information: Latitude: 37.697588 (in decimal degrees) Longitude: -99.358235 (in decimal degrees) Elevation: Unknown Datum: <input type="checkbox"/> WGS 84, <input checked="" type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: WAAS) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input checked="" type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m		

2 WATER WELL OWNER: **Yahootie Land Inc.**
 RR#, Street Address, Box #: **5608 Rittgers Ct.**
 City, State, ZIP Code : **Johnson, IA 50131**



4 DEPTH OF COMPLETED WELL **163** ft.

Depth(s) Groundwater Encountered (1) **77** ft. (2) ft. (3) ft.

WELL'S STATIC WATER LEVEL **77** ft. below land surface measured on mo/day/yr **03/20/17**

Pump test data: Well water was **not checked** ft. after hours pumping gpm

EST. YIELD gpm. Well water was ft. after hours pumping gpm

Bore Hole Diameter **9** in. to **167** ft., and in. to ft.

WELL WATER TO BE USED AS: Public water supply Geothermal Injection well
 Domestic Feedlot Oil field water supply Dewatering Other (Specify below) **Stock Well**
 Irrigation Industrial Domestic-lawn & garden Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes No
 If yes, mo/day/yr sample was submitted

Water well disinfected? Yes No

5 TYPE OF CASING USED: Steel PVC Other

CASING JOINTS: Glued Clamped Welded Threaded Other (Specify)

Casing diameter **5** in. to **141** ft., Diameter in. to ft., Diameter in. to ft., Diameter in. to ft.

Casing height above land surface **24** in., Weight **2.36** lbs./ft., Wall thickness or gauge No. **.214**

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 **141** ft. to **161** ft., From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From **20** ft. to **161** ft., From ft. to ft., From ft. to ft.

6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other

Grout Intervals: From **0** ft. to **20** 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 Insecticide storage Other (specify below) **Old Well**
 Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well
 Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well

Direction from well **North** Distance from well **10'**

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	4	Topsoil	138	141	Clay, brown & white, hard
4	17	Clay, brown, hard	141	167	Sand & gravel, medium to fine
17	33	Sand, coarse to very fine, brown clay			
33	43	Clay, brown, hard			
43	56	Clay, tan & brown, sandy, with caliche, fine gravel and sand streaks			
56	82	Sand & gravel, medium to fine			
82	97	Clay, tan, hard			
97	135	Sand & gravel, medium to fine			
135	138	Clay, tan, with caliche			

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) **03/20/17** 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) **03/23/17**
 under the business name of **Clarke Well & Equipment, Inc.** by (signature) *[Signature]*

INSTRUCTIONS: Use typewriter 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 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 <http://www.kdheks.gov/waterwell/index.html>.