	MELL K			WWC-5			sion of Water	22842	Wall ID	
	Record			e in Well Use			rces App. No.	T 1: 1: 1:	Well ID	
1 LOCATION OF WATER WELL:			L:	Fraction SW // OF //			ion Number	Township Number	Range Number	
	County: Rawlins    4 NE   4 SW   4 SE   4   T   2 S   R 32   E   E									
2 WELL	OWNER: L	ast Name: Base	gall	First: Tom	Street o	Rura	al Address wh	ere well is located	(if unknown, distance and	
Business	F0F 1 0				direction	from ne	earest town or int	ersection): If at owner	's address, check here:	
Address: 5254 Sattler Rd 1070' from South Line, 3753' from West Line								ne		
1/2										
	Herndon	T					T		^	
3 LOCATI WITH "2		4 DEPTH OF COMPLETED WELL:				ft.			9(decimal degre	
SECTIO		Depth(s) Gro	undwater l	Encountered: 1)	ft.		Longitu	de: 100.8756	5.1.1(decimal degre	
SECTION		2)	ft. 3	3) ft., or 4)	Dry W	ell	II Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ■ NAD 27			
, , ,		WELL'S STATIC WATER LEVEL:					Source for Latitude/Longitude:			
	1 }	below land surface, measured on (mo-day-yr)5-17-19				7-16	GPS (unit make/model: Garmin Montana 650T)			
NW	NE	above land surface. measured on (mo-day-yr)				• • • • • • •	(WAAS enabled? ■ Yes □ No)			
	1 1	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map				
w	E	after		s pumping			☐ Online Mapper:			
sw	SE			vater was						
3,,,,,,	X	after hours pumping					6 Elevation:ft. Ground Level TOC			
		Bore Hole Diameter:15 in. to70 ft. an								
	S nilel									
	1 mile  in. to ft.   Other									
				stor Cumples av.=11 TD			10 🗆 🗆	ield Water Summler la	2256	
1. Domestic: 5. ☐ Public Water Supply: well ID										
☐ Houser		6. Dewatering: how many wells?					11. Test Hole: well ID Geotechnical			
Lawn a		7. ☐ Aquifer Recharge: well ID ☐ Cased ☐ Uncased ☐ Geotechnical  8. ☐ Monitoring: well ID								
2. Irrigation		9. Environmental Remediation: well ID					·			
3. Feedlo		☐ Air Sparge ☐ Soil Vapor Extraction					b) Open Loop Surface Discharge Inj. of Water			
4. Industr		Recovery Injection				•	13.  Other (specify):			
_		_	•		1.1/4-	NI-				
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:										
Water well disinfected? ■ Yes □ No										
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other										
Casing diam	the above land surface 48 in. Weight 5.82 lbs./ft. Wall thickness or gauge No. 0.332									
Casing height above land surface 48 in. Weight 5.82 lbs./ft. Wall thickness or gauge No. U.332										
TYPE OF SCREEN OR PERFORATION MATERIAL:										
☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)										
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)										
	CREEN OR PERFORATION OPENINGS ARE:									
		RFORATION OPENINGS ARE:  Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)								
Louve	☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ■ Saw Cut ☐ None (Open Hole)									
SCREEN-PERFORATED INTERVALS: From30										
G	RAVEL PA	CK INTERVA	ALS: From	n	У ft., F	rom	ft. to .	ft., From	п. то п.	
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other										
Grout Interv	als: From	ft. to		ft., From	ft. to		ft., From	ft. to	ft.	
Nearest sou	rce of possib	le contaminatio	on:							
Septic			Lateral Line	,			Livestock Pens		cide Storage oned Water Well	
Sewer 1			Cess Pool	☐ Sewage I		님;	Fuel Storage			
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well										
Other (Specify)  Direction from well?  Distance from well?  ft.										
10 FROM	TO		ITHOLO		FRC				PLUGGING INTERVA	
0		surface	THOLO	dic nod	1100	+	10 2	1110. 200 (401.1) 0.		
2		Loess				$\overline{}$				
10		Clay				-+				
21		fine to med s	and		-	-+				
				ravel						
38		fine to med s	and & gr	avei						
48	80	Black Shale								
					Note	s:				
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) .5-16-16 and this record is true to the best of my knowledge and belief.										
Kansas Water Well Contractor's License No. 838 This Water Well Record was completed on (mo-day-year) 6-16-16										
under the b	usiness nam	e of KMD.D	nung. &. \	Well Service, LLC.	·····		gnature	wisanmant Busan of W	later GWTS Section	
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										
Visit us at htt	p://www.kdhek	s gov/waterwell/i	ndex.html		KSA 8	∠a-12	12		Neviseu //10/2015	