		ECORD				ision of Wate	1	Well ID		
Original Record Correction Char 1 LOCATION OF WATER WELL:				Fraction	Resources App. No.					
County: MORTON				SE 1/4 NE 1/4 NE 1/4						
2 WELL OWNER: Last Name: DUNN First: LARRY Street or Rural Address where well is located (if unknown, distance and										
Business: direct						ection from nearest town or intersection): If at owner's address, check here:				
	Address: BOX 471 Address:									
City: ELKHART State: KS ZIP: 62950										
WITH 6V9 IN 4 DEPTH OF COMPLETED WELL:								doc (decimal degrees)		
SECTIO	N BOX:			Encountered: 1)1.1		Long	Longitude:101.70108(decimal degrees) Horizontal Datum: WGS 84 I NAD 83 NAD 27			
. N	4	2)	2) ft. 3) ft., or 4) [] I ELL'S STATIC WATER LEVEL:			Horizontal Datum: D WGS 84 D NAD 83 D NAD 27 Source for Latitude/Longitude:				
		below	■ below land surface, measured on (mo-day-yr)				GPS (unit make/model:GARMAN			
NW				above land surface, measured on (mo-day-yr)			(WAAS enabled? □ Yes □ No)			
				ump test data: Well water was			□ Land Survey □ Topographic Map			
w				pumping 20			Online Mapper:			
sw	SE	after		ater was fi pumping	gnm					
	Estimated Vield			anm			6 Elevation:ft. Ground Level TOC			
	s	Bore Hole	Diameter:	778 in. to 360	. ft. and	Sourc		GPS 🔲 Topographic Map		
Tn			•••	in. to	ft.		- Other			
7 WELL WATER TO BE USED AS:										
1. Domestic:				ter Supply: well ID				ease		
				g: how many wells? charge: well ID			11. Test Hole: well ID □ Cased □.Uncased □ Geotechnical			
				g: well ID			hermal: how many bore			
2. Irrigati				I Remediation: well IE			losed Loop Horizon			
3. 🗌 Feedlo				Soil Vapor E				ischarge 🔲 Inj. of Water		
4. 🗌 Industr	rial	[Recovery	□ Injection		13. 🗌 O	ther (specify):	•••••••••••••••••••••••••••••••••••••••		
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:										
Water well disinfected? Yes 🗆 No										
8 TYPE O	OF CASING	USED:	Steel PV	C 🔲 Other	CASI	NG JOINTS	: Glued Clampe	d 🗌 Welded 🗌 Threaded		
Casing diameter										
Casing height above land surface										
TYPE OF SCREEN OR PERFORATION MATERIAL:										
Steel Steel Fiberglass Brass Galvanized Steel Concrete tile None used (open hole) Other (Specify)										
SCREEN OR PERFORATION OPENINGS ARE:										
■ Continuous Slot										
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)										
SCREEN-PERFORATED INTERVALS: From .220 ft. to .360 ft., From ft. to ft. to ft. to ft. to										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From										
Nearest source of possible contamination: Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage										
Septer Tank Lateral Lines Pit Privy Livestock Pens Insecticide storage Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well										
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well										
Other (Specify) .none.in view.										
Direction from well? Distance from well? ft. 10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS										
10 FROM	TO		LITHOLOG	AIC LOG	FROM	TO		TPLUGGING INTERVALS		
0			CAND		255	260	RED CLAY			
20 30		CLAY AND			260	280	SANDSTONE (BRO	JVVIN)		
40		SHALE (YE SAND AND			280 290	290 340	CLAY AND SAND SANDSTONE (BRO			
50		CLAY, SAN		N)	340	350	SANDSTONE (BRO			
120		CLAY AND			350		RED BED			
160	180	CLAY			Notes:					
180		CLAY, SAN		S	-					
200	255	SANDSTO	NE (BROV	N)	1		SKV.			
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION. This water well was a constructed or plugged										
under my jurisdiction and was completed on (mo-day-year). 02/01/20.19 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 938 This Water Well Record was completed of true-day-year). 03/05/20.19 under the business name of SCHAAL DRILLING LLC. Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Ehvironment, 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 yo Precords. Telephone 785-296-5524.										
Kansas Water Well Contractor's License No. 399										
under the b	white conv of	le OI .S.C.F.A	155 00 for en	h constructed well to Kar	ISAS Denartmen	gnature	Anvironment Bureau of V	Vater, GWTS Section		
1000) SW Jackson	St., Suite 420 T	oneka Kansas	66612-1367. Mail one to	Water Well Ow	ner and retain	one for your records. Telen	hone 785-296-5524.		
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015										
							(1)			

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