	R WELL F			WWC-5		Division of Wate	I	1 1	KMW-15		
	al Record			ge in Well Use	R	esources App. N		→ Well ID ⊢			
1 LOCAT	TION OF W	ATER WEI	L:	Fraction	S	ection Numbe	r Township Num		e Number		
Count	y: Decatur			SW 1/4 SW 1/4 SE		1					
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and											
		Slope Lodg	e #186		direction fro	ection from nearest town or intersection): If at owner's address, check here:					
	Address: P.O. Box 72 Address: 109						09 W Commercial, Oberlin				
City:	Oberlin		State: KS	ZIP: 67749		,					
3 LOCAT		1			·	T	20.004				
WITH "				MPLETED WELL:							
1	ON BOX:			Encountered: 1)		Longi	tude:100.52	.958(de	ecimal degrees)		
1	2)						ontal Datum: WGS		i ∐ NAD 27		
	below land surface, measured on (mo-day-yr)					Source for Latitude/Longitude:					
,'	'	above 1	above land surface, measured on (mo-day-yr)				GPS (unit make/model:EPOCH (WAAS enabled? ☐ Yes ■ No)				
NW	NE		Pump test data: Well water was ft.				Land Survey Topographic Map				
w - X	E			s pumping			Online Mapper:				
1 " 1	Well water was ft										
after hours pumping					gpm	6 Elevation: 2562.16					
] ——		Estimated Y	Estimated Yield:gpm Bore Hole Diameter: 8.25 in. to 38								
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID											
1. Domestic		3. L	J Public Wa	ater Supply: Well ID	•••••	IU. ∐ Ui					
_	□ Lawn & Garden 7. □ Aquifer Recharge: well ID □ Livestock 8. ■ Monitoring: well ID KMW-15					12. Geoth	12. Geothermal: how many bores?				
1 —	2. ☐ Irrigation 9. Environmental Remediation: well ID						a) Closed Loop Horizontal Vertical				
	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extraction						b) Open Loop Surface Discharge Inj. of Water				
4. Indust	rial] Recovery	☐ Injection		13. 🔲 Ot	her (specify):				
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 JOINTS: ☐ Glued ☐ Clamped ☐ Welded ■ Threaded											
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:											
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)											
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)											
SCREEN-PERFORATED INTERVALS: From 18 ft. to 38 ft., From ft. to ft., From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other. Grout Intervals: From 1, ft. to 14.5, ft., From ft. to ft.											
Nearest source of possible contamination:											
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage											
☐ Sewer	Lines		Cess Pool	☐ Sewage L		Fuel Storage	_	doned Water We	ell		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well											
☐ Other (Specify) Direction from well?											
10 FROM	TO		ITHOLO	GIC LOG	FROM	TO	LITHO. LOG (cont.) o	r PLUGGING	INTERVALS		
0		Sandy silt				_					
10		Clayey silt									
10		Silt									
20		Clayey silt									
26		Silty clay									
36	38	Silty sand			<u> </u>						
		Notes: Kelling's F					1				
	KDHE project code: U6-020-00236										
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) .12/6/2019 and this record is true to the best of my knowledge and belief.											
Kansas Water Well Contractor's License No. 881 This Water Well Record was completed on (pro-day-year) 2/5/2420											
under the h	nei wen col	e of Woofte	r Pump &	Well	ALC: WEIIN	Signature	pleted on (pro-day-	all M			
Mail	1 white copy ale	ong with a fee of	\$5.00 for each	ch constructed well to: K	ansas Departme	ent of Health and	invironment, Dureau of V	Water, GWTS Sec	ction,		
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Defeau 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											