WATER WELL R		Form W			sion of Water				
Original Record		Change ir			urces App. No.		Well ID		
1 LOCATION OF W		:   F	raction		tion Number	Township Numb		ge Number	
County: Norta				NW4	7	T 4 s		<u>3 □ E <b>X</b>LW</u>	
2 WELL OWNER: L	ast Name: SCO	<b>++</b> F	irst: Cheryl	Street or Rur	al Address w	here well is located	(if unknown,	distance and	
Business: 2 17 25	DAG 1 E	۵	J.	direction from n	earest town or in	tersection): If at owne	r's address, o	check here:	
Address: O(193	Roua C	<u>~</u>				1 W3			
City: Edmon	d St	ate: KS 2	ZIP: 67645		ı				
3 LOCATE WELL			LETED WELL: \$	1907 °		300 UZ1 3	1 2"		
WITH "X" IN					5 Latitud		2)	(decimal degrees)	
SECTION BOX:			countered: 1)						
N	WEI I'S STA	II. 3).		Dry Well Horizontal Datum: WGS 84 NAD 83 NAD 2 Source for Latitude/Longitude:				83 LI NAD 27	
			easured on (mo-day-		Source for Latitude/Longitude:  Source for Latitude/Longitude:  GPS (unit make/model:)				
NWNE			easured on (mo-day-		(WAAS enabled? ☐ Yes ☐ No)				
NW NE			r was f		☐ Land Survey ☐ Topographic Map				
w	after	hours pu	mping	gpm	Online Mapper:				
			er was f						
SW SE	after	hours pu	mping	gpm	6 Elevation	nn· fl	☐ Ground	LLevel □ TOC	
	Estimated Yie		gpm . SSC	01	6 Elevation:				
S  1 mile	Bore Hole Dia	ımeter:	in. to 280	π. and		Other			
7 WELL WATER TO	DE LICED AS		III. W	11.					
I. Domestic:			Supply: well ID		10 🗆 Oil I	ield Water Supply: 1	ease		
☐ Household			how many wells?			le: well ID			
☐ Lawn & Garden			arge: well ID						
Livestock			well ID			mal: how many bore			
2. X Irrigation			temediation: well II		a) Clos	ed Loop 🔲 Horizon	tal 🗌 Verti	ical	
3. Feedlot		Air Sparge	☐ Soil Vapor I	Extraction		n Loop   Surface D			
4.  Industrial	□ R	Recovery	☐ Injection		13. 🔲 Othe	r (specify):			
Was a chemical/bacte	riological samp	le submitt	ed to KDHE?	Yes No	If yes, date s	ample was submitte	ed:		
Water well disinfected?	Yes <b>X</b> N	0		• •		•			
8 TYPE OF CASING Casing diameter	USED: Stee	el <b>X</b> PVC	Other	CASIN	IG JOINTS:	Glued   Clampe	d   Welder	d  Threaded	
Casing diameter	in. to 740	<b>7</b> ft., D	iameter	in. to	ft., Diamet	er in. to .	ft.	_	
Casing height above land	surface	in.	Weight	lbs./ft.	Wall thickne	ess or gauge No			
TYPE OF SCREEN OF	R PERFORATION	ON MATE	RIAL:						
, —	nless Steel	☐ Fibergla				(Specify)			
		☐ Concrete		sed (open hole	)				
SCREEN OR PERFOR				10. 55		704 (0 :0)			
Continuous Slot	☐ Mill Slot					Other (Specify)			
Louvered Shutter	☐ Key Punched	d ∐ Wire	wrappedsa	W Cut	one (Open Hol	e) A E	A 40	Δ	
CD AVEL DA	CV INTEDVAL	S. From S		) & From		H., FIOIII	II. 10		
O CDOUT MATERI	SCREEN-PERFORATED INTERVALS: From								
Grout Intervals: From	T:   Near cer		From	ff to	ft From	ft to	A		
Nearest source of possib			., 1 10111	11. 10	11., 1 10111	11. 10			
Septic Tank		teral Lines	☐ Pit Privy		Livestock Pens	☐ Insecti	icide Storage	;	
☐ Sewer Lines		ss Pool	☐ Sewage La	_	Fuel Storage	_	loned Water		
☐ Watertight Sewer Li	nes 🗆 Se	epage Pit	☐ Feedyard		Fertilizer Stora	ge 🔲 Oil We	ell/Gas Well		
☐ Other (Specify)  Direction from well?									
								O DUTEDA :	
10 FROM TO	Ll	<u> THOLOGI</u>	LOG	FROM	TO L	ITHO. LOG (cont.) o	r PLUGGIN	GINTERVALS	
				<del>                                     </del>					
		7.1							
				N-4-					
				Notes:					
				_					
11 CONTRACTOR	PORTANDOS	WNEDIC	PEDTIFICATION	J. This	e well wes	constructed 🗖 ===	onotmict - 1	or [ =lu===1	
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) 10:00:00:00:00:00:00:00:00:00:00:00:00:0									
Kansas Water Well Contractor's License No. 432. This Water Well Record was completed on two-day-year) 310-110									
under the business nam	e of SOVICE	nt In	naathon	Si	gnatur	shipe them	٠٠٠٠٠		
Mail 1 white copy al	ong with a fee of \$5	.00 for each c	onstructed well to: Kar	sas Department	of Health and E	vironment, Bureau of W	ater, GWTS	Section,	
1			512-1367. Mail one to			for your records. Telep			
Visit us at http://www.kdhek	s.gov/waterwell/ind	lex.html		KSA 82a-12	12	,	Revised	17/10/2015	

## Sargent Irrigation WELL AND PUMP SERVICE

PO Box 268 Holdrege, NE 68949 825 Brewster Road

Phone: (308) 995-6143

1-800-860-2946

## **TEST HOLE LOG**

CUSTOMER:	Cheryl Scott	DATE:	09/16/2015
WELL ID:	Norton, KS		
LOCATION:	NE ¼, 7-T4S-R23W Norton Co., KS		
LATITUDE:	N 39° 43' 31.2"		
LONGITUDE:	W 99°57' 39.3"		
FOOTAGES:			
DRILLED BY:	Scott		

SWL: **PWL**: GPM:

from feet	- <u>to fee</u>	<u>et</u>
0	13	Sandy topsoil and sandy clay
13	20	Fine med to coarse sand and fine gravel
20	23	Brown clay
23	40	Fine med coarse sand and fine gravel with clay layer
40	55	Brown clay with limestone streaks
55	60	Fine sand and sandy brown clay
60	69	Tan sandy clay with white shale strips
69	80	sandstone with trace sandy clay
80	100	Sandstone with tan sandy clay and white shale strips
100	107	Sandstone
107	120	Brown clay
120	135	Brown clay
135	140	Fine sand and sandstone
140	160	Med coarse sandstone with tan clay layer and fine gravel
160	180	Med coarse sandstone and fine med gravel with clay layer
180	190	Brown clay with med coarse sandstone
190	200	Med coarse sandstone with brown clay layer and limestone
200	205	Brown clay
205	220	Med coarse sandstone with white shale streaks
220	240	Tan sandy clay
240	251	Tan sandy clay
251	260	Med coarse sand and fine gravel
260	266	Med coarse sand and fine gravel
266	280	Tan sandy clay with ochre strips
280	289	Tan sandy clay
289	300	Ochre and shale