				W W C-5			sion of Wate	,	061	W-II ID	Middle	
			Chang	ge in Well Use			urces App. N			Well ID	N. I.	
		VATER WELL:		Fraction	1/		tion Numbe		hip Number		ge Number	
	: Norton			1/4 SW 1/4 SW			23	T	4 S		3 □ E ■ W	
2 WELL	OWNER: 1	Last Name: Renner	r	First: Craig		eet or Rural Address where well is located (if unknown, distance and						
Business:	directio	direction from nearest town or intersection): If at owner's address, check here:										
Address: 1010 West						Int. of Hwy #9 & #283-4.5miles North on the East side						
Address:		a	<b>!</b>				-5 0 #200-	4.51111165 14	Ortif Off the	Last sit	<b>1</b> C	
City:	Norton	State	e: KS	ZIP: <b>67654</b>			T					
3 LOCAT		4 DEPTH OF	4 DEPTH OF COMPLETED WELL: 27.				5 Latitu	ıde <sup>.</sup>	39.690194	ļ	(decimal degrees)	
WITH "		Depth(s) Groundwater Encountered: 1) ft.					Longitude: 99.888167 (decimal degrees)					
SECTIO		2) ft. 3) ft. or 4) \( \bullet \) Dry Well					Longi	Horizontal Datum: WGS 84 NAD 83 NAD 27				
N N	1			TER LEVEL:						L NAD	65 - NAD 21	
			below land surface, measured on (mo-day-yr)					Source for Latitude/Longitude:  GPS (unit make/model:Garmin Montana 650T.)				
	<u>'</u>	· -	above land surface, measured on (mo-day-yr)					(WAAS enabled? ■ Yes □ No)				
NW	NE		Pump test data: Well water was					☐ Land Survey ☐ Topographic Map				
w A	-E	after hours pumping gpm						Online Mapper:				
1 1 1		4.66	Well water was ft.					mme wappe				
SW	SE	after hours pumping gpm										
1 1 1	1 1	Estimated Vield:gnm					6 Elevation:ft. Ground Level TOC					
	S	Bore Hole Diameter:15 in. to274 ft. and					Source: ☐ Land Survey ☐ GPS ☐ Topographic Map					
1 n	-	Boile Hole Blain	in. to ft.					☐ Other				
7 WELL WATER TO BE USED AS:												
1. Domestic:												
Lawn &			6. ☐ Dewatering: how many wells?									
									many bores?			
-	Livestock 8. Monitoring: well ID											
2. Irrigati						· · · · · · · · · · · · · · · · · · ·						
3. Feedlo				ge Soil Vapo		OII	b) Open Loop  Surface Discharge  Inj. of Water					
4. ☐ Industrial ☐ Recovery ☐ Injection 13. ☐ Other (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 diameter 8 in to 274 ft., Diameter in to ft., Diameter in to ft.												
Casing diameter 8 in to 274 ft., Diameter in to ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 12 in Weight 5.82 lbs/ft. Wall thickness or gauge No. 0.332.												
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)												
CODEEN	rea Shuller	L Key Funched	. L .	m .194 ft. to .27	Saw Cut	N	one (Open n	1016)	F	0.4.	۵	
				m20 ft. to2				o ft	., From	ft. to	ft.	
9 GROUT MATERIAL: □ Neat cement □ Cement grout ■ Bentonite □ Other												
Grout Interv	als: From	ft. to20	Ų	ft., From	ft. to	• • • • • • • • • • • • • • • • • • • •	ft., From		ft. to	ft.		
		ole contamination:										
☐ Septic		☐ Late:		,			Livestock Pe		☐ Insectici	_		
☐ Sewer		☐ Cess		☐ Sewage								
		ines					Fertilizer Sto	rage	Oil Well	/Gas Well		
☐ Other (Specify)  Direction from well?  Distance from well?  ft.												
10 FROM	TO	LITE	HOLO	GIC LOG		OM		LITHO. LO	G (cont.) or I	PLUGGIN	G INTERVALS	
0	2	surface			222		235	clay				
2	15	Loess			235			fine to som	ne med sar	nd w/ cla	y strks	
15	33	clay			245			clav				
33	97	cemented sand	to cla	v & caliche	260				v/ clay strk	e .		
97	125									-		
		fine to med sand			265			yellow och				
125	155	clay w/ sandy cl			270		280	black shale	?			
155	201						otes:					
201 215 clay w/ sandstone strks												
215 222 fine sand w/ sandstone												
11 CONT	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) .4-22-16												
Kansas Wa	ter Well Co	ntractor's License	No.	838 This	Water W	ell Rec	ord was cor	npleted on (	merstay-yea	ar) 5-22-	-16	
under the b	usiness nan	ne of RMD. Drillit	ng.&.\	Mell Service, LLC		Sig	nature		1 deto.			
under the business name of RMD Drilling & Well Service, LLC.  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												