

Kansas Department of Agriculture  
 Division of Water Resources  
**CHANGE: P/D WORKSHEET**

1. File Number: <b>34918</b>	2. Status Change Date:	3. Change Num: <b>1</b>	4. Field Office: <b>02</b>	5. GMD: <b>05</b>
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6. Status: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied by DWR/GMD <input type="checkbox"/> Dismiss by Request/Failure to Return	7. Filing Date of Change: <b>3/7/18</b>
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8a. Applicant(s) New to system <input type="checkbox"/>	Person ID _____ Add Seq# _____	8c. Landowner(s) New to system <input type="checkbox"/>	Person ID _____ Add Seq# _____
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8b. Landowner(s) New to system <input type="checkbox"/>  <b>ILS LAND LLC                  PO BOX 1506                  GREAT BEND KS 67530-1503</b>	Person ID <b>59931</b> Add Seq# <b>1</b>	8d. WUC New to system <input type="checkbox"/>  <b>8B</b>	Person ID <b>59931</b> Add Seq# <b>1</b>
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9. Documents and Enclosure(s): <input checked="" type="checkbox"/> DWR Meter(s) Date to Comply: <b>12/31/18</b> <input checked="" type="checkbox"/> N & P Date to Comply: <b>12/31/18</b>	
<input type="checkbox"/> Anti-Reverse Meter <input type="checkbox"/> Meter Seal <input checked="" type="checkbox"/> Check Valve <input checked="" type="checkbox"/> N & P Form <input checked="" type="checkbox"/> Water Tube <input checked="" type="checkbox"/> Driller Copy <input checked="" type="checkbox"/> H & E Letter	
<input type="checkbox"/> Conservation Plan    Date Required: _____    Date Approved: _____    Date to Comply: _____	

10. Use Made of Water    From: --- _____    To: --- _____
---

Date Prepared: <b>3/8/18</b>	By: <b>EKF</b>
Date Entered:	By:

File No. **34918**      11. County: **PN**      Basin: **ARKANSAS RIVER**      Stream: **---**      Formation Code: **180**      Special Use: **---**

12. Points of Diversion										Rate and Quantity						
CHK	MOD	DEL	PDIV	Qualifier	S	T	R	ID	'N	'W	Comment (AKA Line)	Rate gpm	Quantity af	Rate gpm	Quantity af	Overlap PD Files
<b>DEL</b>			<b>42114</b>	<b>NW NE SE</b>	<b>34</b>	<b>22</b>	<b>16W</b>	<b>2</b>	<b>2600</b>	<b>1290</b>						<b>NONE</b>
<b>ENT</b>				<b>NE NW SE</b>	<b>34</b>	<b>22</b>	<b>16W</b>	<b>_</b>	<b>2633</b>	<b>1335</b>		<b>755</b>	<b>195</b>	<b>755</b>	<b>195</b>	<b>NONE</b>

13. Storage: Rate \_\_\_\_\_ NF      Quantity \_\_\_\_\_ ac/ft      Additional Rate \_\_\_\_\_ NF      Additional Quantity \_\_\_\_\_ ac/ft

14. Limitation: \_\_\_\_\_ af/yr at \_\_\_\_\_ gpm ( \_\_\_\_\_ cfs) when combined with file number(s) \_\_\_\_\_  
 Limitation: \_\_\_\_\_ af/yr at \_\_\_\_\_ gpm ( \_\_\_\_\_ cfs) when combined with file number(s) \_\_\_\_\_

15. 5YR Allocation:    Allocation Type \_\_\_\_\_    Start Year \_\_\_\_\_    5 YR Amount \_\_\_\_\_    Amount Unit \_\_\_\_\_    Base Acres \_\_\_\_\_    Comment \_\_\_\_\_

16. Place of Use									NE¼				NW¼				SW¼				SE¼				Total	Owner	Chg?	Overlap Files	
CHK	MOD	DEL	ENT	PUSE	S	T	R	ID	NE ¼	NW ¼	SW ¼	SE ¼	NE ¼	NW ¼	SW ¼	SE ¼	NE ¼	NW ¼	SW ¼	SE ¼	NE ¼	NW ¼	SW ¼	SE ¼					
<b>CHK</b>				<b>6290</b>	<b>34</b>	<b>22</b>	<b>16W</b>	<b>2</b>																		<b>59931</b>	<b>N</b>	<b>NONE</b>	

Base Acres: **---**    Year: **---**    Minimum Reasonable Quantity:  
 Comments:

Submit completed application to:  
 Kansas Department of Agriculture  
 Division of Water Resources  
 Field Office for your area.  
 Call for address:

Topeka -- (785) 296-5733  
 Stafford -- (620) 234-5311  
 Stockton -- (785) 425-6787  
 Garden City -- (620) 276-2901  
<http://agriculture.ks.gov/dwr>

## DWR FIELD OFFICE APPLICATION FOR APPROVAL TO CHANGE THE PLACE OF USE AND/OR THE POINT OF DIVERSION **WATER METER REQUIRED**



**STATE OF KANSAS**

**Filing Fee Must Accompany the Application, K.S.A. 82a-708b(b), as amended.**  
 Fee Schedule is on the third page of this application form.

**Paragraph Nos. 1, 2, 3 & 5 must be completed. Complete all other applicable portions.** If change in point of diversion is greater than 100 feet, or if place of use will be changed, include a topographic map or detailed plat showing the authorized and proposed point(s) of diversion and/or place of use.

File No. 34918

**RECEIVED**  
 3:36 pm  
 MAR 07 2018  
 Stafford Field Office  
 Division of Water Resources

1. Application is hereby made for approval of the Chief Engineer to change the (check one or both):

Place of Use                       Point of Diversion

under the water right which is the subject of this application in accordance with the conditions described below

The source of supply is:                       Groundwater                       Surface water

2. Name and address of Applicant: Bronson Smith

ILS Land LLC, PO Box 1506, Great Bend KS 67530-1506

Phone Number: (620)792-6166

Email address: bronson.smith@ilsbeef.com

Name and address of Water Use Correspondent: ILS Land LLC

PO Box 1506, Great Bend KS 67530-1506

Phone Number: (620)792-6166

Email address: \_\_\_\_\_

3. The presently authorized place of use is:

Owner of Land ---- NAME: ILS Land LLC

ADDRESS: PO Box 1506, Great Bend KS 67530-1506

(If there is more than one landowner, attach supplemental sheets as necessary.)

Sec.	Twp.	Range	NE¼				NW¼				SW¼				SE¼				TOTAL ACRES
			NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	
No	Change																		

4. If this application is for a change in place of use, it is proposed that the place of use be changed to:

Owner of Land ---- NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

(If there is more than one landowner, attach supplemental sheets as necessary.)

Sec.	Twp.	Range	NE¼				NW¼				SW¼				SE¼				TOTAL ACRES
			NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	

**For Office Use Only:** Code \_\_\_\_\_ Fee \$ 100 TR # \_\_\_\_\_ Receipt Date \_\_\_\_\_ Check # \_\_\_\_\_

5. **Presently authorized point of diversion:**  
 One in the NW Quarter of the NE Quarter of the SE Quarter of Section 34, Township 22 South, Range 16 W, in Pawnee County, Kansas, 2600 feet North 1290 feet West of Southeast corner of section. Authorized Rate 755 gpm Authorized Quantity 195 AF Depth of well 215 (feet)  
**(DWR use only: Computer ID No. 2 GPS 2633 feet North 1305 feet West)**  
 This point will not be changed  This point will be changed as follows:  No change, point better described with GPS as follows:  
**Proposed point of diversion: (Complete only if change is requested or if existing point is better described by GPS)**  
 One in the NE Quarter of the NW Quarter of the SE Quarter of Section 34, Township 22 South, Range 16 W, in Pawnee County, Kansas, 2633 feet North 1335 feet West of Southeast corner of section. Proposed Rate no change Proposed Quantity no change Proposed well depth (feet) ~215.  
 This point is:  Additional Well  Geo Center List other water rights that will use this point none.

6. **Presently authorized point of diversion:**  
 One in the \_\_\_\_\_ Quarter of the \_\_\_\_\_ Quarter of the \_\_\_\_\_ Quarter of Section \_\_\_\_\_, Township \_\_\_\_\_ South, Range \_\_\_\_\_ (E/W), in \_\_\_\_\_ County, Kansas, \_\_\_\_\_ feet North \_\_\_\_\_ feet West of Southeast corner of section. Authorized Rate \_\_\_\_\_ Authorized Quantity \_\_\_\_\_ Depth of well \_\_\_\_\_ (feet)  
**(DWR use only: Computer ID No. \_\_\_\_\_ GPS \_\_\_\_\_ feet North \_\_\_\_\_ feet West)**  
 This point will not be changed  This point will be changed as follows:  No change, point better described with GPS as follows:  
**Proposed point of diversion: (Complete only if change is requested or if existing point is better described by GPS)**  
 One in the \_\_\_\_\_ Quarter of the \_\_\_\_\_ Quarter of the \_\_\_\_\_ Quarter of Section \_\_\_\_\_, Township \_\_\_\_\_ South, Range \_\_\_\_\_ (E/W), in \_\_\_\_\_ County, Kansas, \_\_\_\_\_ feet North \_\_\_\_\_ feet West of Southeast corner of section. Proposed Rate \_\_\_\_\_ Proposed Quantity \_\_\_\_\_ Proposed well depth (feet) \_\_\_\_\_.  
 This point is:  Additional Well  Geo Center List other water rights that will use this point \_\_\_\_\_.

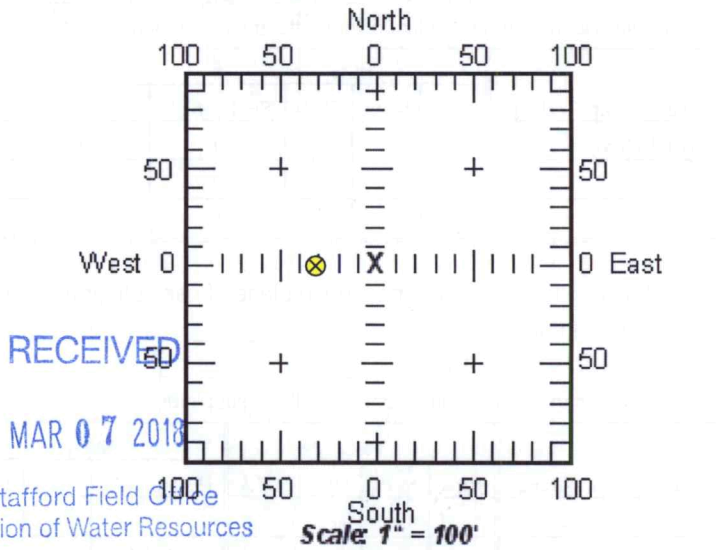
7. The changes herein are desired for the following reasons?  
 (please be specific) well casing is failing  
 \_\_\_\_\_  
 \_\_\_\_\_

8. If a well, is the test hole log attached?  Yes  No  
 9. The change(s) (was)(will be) completed by?  
ASAP  
 10. If the point of diversion is a well:  
 (a) What are you going to do with the old well?  
plug it  
 (b) When will this be done? when new well drilled

11. Groundwater Management District recommendation attached?  Yes  No

12. Assisted by EKF // SFFO

13a. If the proposed point of diversion will be relocated within 100 feet of the existing point of diversion, indicate its location on the diagram below in relation to the existing point of diversion. (PLEASE NOTE: The "X" in center of diagram below represents presently authorized point of diversion.)



13b. If the proposed point of diversion will be relocated more than 100 feet but within 1320 feet from the existing point of diversion, attach a topographic map or aerial photograph. For groundwater sources, show all wells (including domestic) within one-half mile of the proposed point of diversion and the names and mailing addresses of the owners. For surface water sources, show the names and addresses of the landowner(s) one-half mile downstream and one-half mile upstream from your property lines.

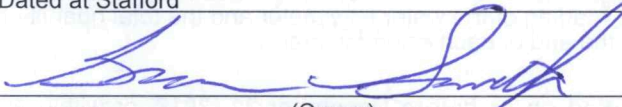
14. If the proposed groundwater point of diversion is 300 or fewer feet from existing point of diversion, complete the following:

- (a) Does the undersigned represent all owners of the currently authorized place(s) of use identified in this application?  
 Yes     No    (If no, all owners must sign this application.)
- (b) Will the ownership interest of any owner of the currently authorized place(s) of use identified in this application be adversely affected if this application is approved as requested?  
 Yes     No    (If yes, all owners must sign this application.)
- (c) If this application is not approved expeditiously, will there be substantial damage to property, public health or safety?  
 Yes     No    (If no, all owners must sign this application.)

If the application proposes a surface water change in point of diversion, a groundwater change in point of diversion greater than 300 feet, or a change in place of use, the application must be signed by all owners of the currently authorized place of use, or their duly authorized agent (attach notarized statement authorizing representation).


**I hereby verify, being first duly sworn upon my oath or affirmation and under penalty of perjury, that I am of lawful age and the owner, the spouse of the owner, or a duly authorized agent of the owner(s) to make this application on their behalf, in regards to the water right(s) to which this application pertains. I further verify that the statements contained in this application are true, correct and complete.**

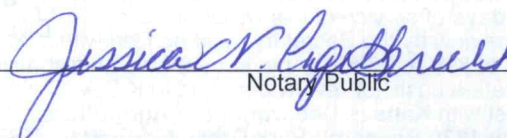
Dated at Stafford Kansas, this 7<sup>th</sup> day of March, 2018.

	
(Owner)	(Spouse)
<u>Bronson Smith</u>	
(Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)

State of Kansas }  
 County of Stafford } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 7<sup>th</sup> day of March, 2018.

My Commission Expires 

  
 Notary Public

**ONLY COMPLETE APPLICATIONS WILL BE PROCESSED.** To be complete, all of the applicable portions of the application form must be completed with accurate information; maps, if necessary, must be included; signatures of all the appropriate owners' must be affixed to the application and notarized; and the appropriate fee must be paid.

**FEE SCHEDULE**

Each application to change the place of use or the point of diversion under this section shall be accompanied by the application fee set forth in the schedule below: Make checks payable to: **Kansas Department of Agriculture**

- (1) Application to change a point of diversion 300 feet or less ..... \$100
- (2) Application to change a point of diversion more than 300 feet ..... \$200
- (3) Application to change the place of use ..... \$200

**RECEIVED**

**MAR 07 2018**

Stafford Field Office  
 Division of Water Resources

**SUMMARY ORDER APPROVING APPLICATION FOR CHANGE AND IMPOSING CONDITIONS**

This Summary Order is issued under authority of K.S.A. 82a-708b, as amended, and K.A.R. 5-5-1, *et seq.* and other applicable provisions of the *Kansas Water Appropriation Law, K.S.A. 82a-701 et. seq.*, and rules and regulations promulgated thereunder, With the exception of those conditions expressly contained herein, this Summary Order does not change the terms, conditions and limitations of File No. 34918.

1. A change application was received on March 7, 2018 requesting that the place of use and / or point of diversion authorized under the above-referenced file number be changed as described in the application.
2. On and after the effective date of this summary order, the authorized place(s) of use shall be located substantially as shown on the topographic map accompanying the application to change the place of use.  Applicable  Not Applicable
3. The change in point of diversion shall not impair existing rights and shall be limited to the same source or sources of water as previously authorized. The point of diversion authorized by this summary order shall be located within a 50 foot radius of the authorized point(s) of diversion.  Applicable  Not Applicable
4. The point(s) of diversion authorized herein shall not actually be located more than 80 feet from the previously authorized point(s) of diversion.  Applicable  Not Applicable
5. As required by K.A.R. 5-3-5d, if the works for diversion is a well with a diversion rate of 100 gallons per minute or more, a tube or other device suitable for making water level measurements shall be installed, operated and maintained in accordance with K.A.R. 5-6-13.  Applicable  Not Applicable
6. **The owner of the authorized place(s) of use shall properly install an acceptable water flow meter on or before December 31, 2018**, or before the first use of water, whichever occurs first. The water flow meter shall be installed, operated and maintained in accordance with K.A.R. 5-1-4 through 5-1-12. As required by K.S.A. 82a-732, as amended, and K.A.R. 5-3-5e, the owner shall maintain records and report the reading of the water flow meter and the total quantity of water diverted annually to the Chief Engineer by March 1 following the end of each calendar year.  
 Applicable  Not Applicable
7. **Installation of the works for diversion of water shall be completed on or before December 31, 2018**, or within any authorized extension of time. By March 1, 2019 the applicant shall notify the Chief Engineer that construction of the works for diversion has been completed, on the form provided by the Chief Engineer, as required by K.A.R. 5-8-4e.  
 Applicable  Not Applicable
8. **The completed well log shall be submitted with the required notice.**  Applicable  Not Applicable
9. All diversion works into which any type of chemical or other foreign substance will be injected into the water shall be equipped with an in-line, automatic, quick-closing check valve capable of preventing pollution of the source of the water supply. The check valve(s) shall be installed, operated and maintained in accordance with K.A.R. 5-3-5c.  Applicable  Not Applicable
10. Additional Conditions are attached.  Yes  No
11. In accordance with K.S.A. 82a-708a, as amended, and K.A.R. 5-5-14, all of the owners of the authorized place(s) of use of water appropriated under the above-referenced file number are responsible for compliance with its terms, conditions and limitations, as amended and/or supplemented by this Summary Order, and with applicable provisions of the *Kansas Water Appropriation Law* and the *Rules and Regulations* promulgated thereunder. Failure to comply with these provisions may result in civil penalties pursuant to K.S.A. 82a-737, as amended, and/or the suspension or revocation and dismissal of the water or appropriation right or any other enforcement actions authorized by law.

**Administrative Appeal and Effective Date of Order**

If you are aggrieved by this order, pursuant to K.S.A. 82a-1901 you may request an evidentiary hearing before the Chief Engineer or request administrative review by the Secretary of Agriculture. A request for hearing by the Chief Engineer must be filed within **15 days** of service of this Order and a request for administrative review by the Secretary must be filed within **30 days** pursuant to K.S.A. 77-531. Any request for administrative review must state a basis for review pursuant to K.S.A. 77-527. File any request with **Kansas Department of Agriculture, Legal Division, 1320 Research Park Drive, Manhattan, KS 66502**. Failure to timely request a hearing or review may preclude review under the Kansas Judicial Review Act.

*For Use by Register of Deeds*

RECEIVED

MAR 07 2018

FOR OFFICE USE ONLY  
**APPLICATION APPROVED AND  
SUMMARY ORDER ISSUED**

Stafford Field Office  
Division of Water Resources

*Cameron R. Conant*  
Duly Authorized Designee of the Chief Engineer  
(Print Name): Cameron R. Conant  
Division of Water Resources - Kansas Department of Agriculture

Date of Issuance: 3/7/18

State of Kansas )  
County of Stafford ) SS

Acknowledged before me on 3/07/18

by Cameron Conant

Signature: Jessica Engelbrecht  
Notary Public



My commission expires \_\_\_\_\_

(Notary Seal)



Stafford Field Office  
300 S. Main Street  
Stafford, Kansas 67578-1521

Jackie McClaskey, Secretary  
David W. Barfield, Chief Engineer  
Jeff Lanterman, Water Commissioner

Phone: 620-234-5311  
Fax: 620-234-6900  
[www.agriculture.ks.gov](http://www.agriculture.ks.gov)

Governor Jeff Colyer, M.D.

March 7, 2018

Bronson Smith  
ILS Land LLC  
PO Box 1506  
Great Bend KS 67530-1506

Re: Water Right, File No(s). 34918

Dear Water Right Owner:

Enclosed is the order executed by the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, approving the application for change under the above referenced file number(s).

Your attention is directed to the enclosures and to the terms, conditions and limitations specified in this approval for change. An acceptable water flow meter must be installed on your well before any water is applied as authorized under this change approval. A copy of the approved list of Certified Water Flowmeters as well as the regulations regarding the installation of flowmeters, measurement tubes and check valves can be found at <http://agriculture.ks.gov/divisions-programs/dwr/water-appropriation/water-flowmeters>. If you do not have access to the internet, please contact this office and we will send you a paper copy of the referenced information.

Since this order modifies the original document referred to above, it should be recorded with the Register of Deeds as other instruments affecting real estate.

This order requires that a notice and completion of works form be submitted once the diversion works are completed, including a properly installed flowmeter. This form is available at the referenced website.

Any abandoned well must be plugged in accordance with the requirements of Article 30 of the Rules and Regulations as adopted by the Kansas Department of Health and Environment.

Should you have any questions, please feel free to contact this office. If you wish to refer to a specific file, please reference it when you contact us.

Sincerely,

A handwritten signature in black ink, appearing to read "Jeff Lanterman".

Jeff Lanterman  
Water Commissioner

Enclosures

pc: Water Rights Section  
Groundwater Management District No.5

## CERTIFICATE OF SERVICE

On this **7th** day of **March, 2018**, I hereby certify that the attached Change in Point of Diversion for Water Right, File No. **34918**, dated **March 7, 2018** was hand delivered to the following:

Bronson Smith

A copy of the letter was sent to the following;

GMD 5

  
-----  
Staff



WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: Pawnee		C-N 1/2 1/4 SE 1/4	34	T 22 S	R 16 EW		
Distance and direction from nearest town or city? 6 S, 2 E, 1/2 N, W to well from Larned			Street address of well if located within city?				
2 WATER WELL OWNER: Leonard Wurm							
RR#, St. Address, Box # :			Board of Agriculture, Division of Water Resources				
City, State, ZIP Code : Larned, Ks. 67550			Application Number: 34918				
3 DEPTH OF COMPLETED WELL... 215... ft. Bore Hole Diameter... 29... in. to... 215... ft., and... in. to... ft.							
Well Water to be used as:							
5 Public water supply		8 Air conditioning		11 Injection well			
1 Domestic		3 Feedlot		6 Oil field water supply			
9 Dewatering		12 Other (Specify below)		7 Lawn and garden only			
10 Observation well		4 Industrial		2 Irrigation			
Well's static water level... 28... ft. below land surface measured on... 1... month... 13... day... 81... year							
Pump Test Data : Well water was... 119... ft. after... 1... hours pumping... 1000... gpm							
Est. Yield 1300 gpm: Well water was 130 ft. after 1 1/2 hours pumping 1300 gpm							
4 TYPE OF BLANK CASING USED:							
5 Wrought iron		8 Concrete tile		Casing Joints: Glued... Clamped...			
0 Steel		3 RMP (SR)		6 Asbestos-Cement			
9 Other (specify below)		7 Fiberglass		Welded... X...			
2 PVC		4 ABS		Threaded...			
Blank casing dia... 16... in. to... 185... ft., Dia... in. to... ft., Dia... in. to... ft.							
Casing height above land surface... 18... in., weight... lbs./ft. Well thickness or gauge No... 7							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
7 PVC		10 Asbestos-cement		0 Steel			
3 Stainless steel		8 RMP (SR)		11 Other (specify)			
5 Fiberglass		9 ABS		12 None used (open hole)			
2 Brass		4 Galvanized steel		6 Concrete tile			
Screen or Perforation Openings Are:							
5 Gauzed wrapped		8 Saw cut		11 None (open hole)			
1 Continuous slot		3 Mill slot		6 Wire wrapped			
9 Drilled holes		7 Torch cut		2 Louvered shutter			
4 Key punched		10 Other (specify)		3 Lateral lines			
Screen-Perforation Dia... 16... in. to... 215... ft., Dia... in. to... ft., Dia... in. to... ft.							
Screen-Perforated Intervals: From... 185... ft. to... 215... ft., From... ft. to... ft., From... ft. to... ft.							
Gravel Pack Intervals: From... 0... ft. to... 220... ft., From... ft. to... ft., From... ft. to... ft.							
5 GROUT MATERIAL:							
0 Neat cement		2 Cement grout		3 Bentonite			
4 Other		14 Abandoned water well		10 Fuel storage			
11 Fertilizer storage		15 Oil well/Gas well		4 Cess pool			
8 Feed yard		12 Insecticide storage		16 Other (specify below)			
9 Livestock pens		13 Watertight sewer lines		2 Sewer lines			
6 Pit privy		7 Sewage lagoon		3 Lateral lines			
Direction from well... NE How many feet... 2000... ? Water Well Disinfected? Yes HTH... No							
Was a chemical/bacteriological sample submitted to Department? Yes... No X... If yes, date sample was submitted... month... day... year: Pump Installed? Yes... X... No							
If Yes: Pump Manufacturer's name... W.L.R. Model No. 5stg.12CH..HP 100... Volts 460							
Depth of Pump Intake... 140... ft. Pumps Capacity rated at... 800... gal./min.							
Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other							
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (0) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on... 5... month... 12... day... 81... year							
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No... 134							
This Water Well Record was completed on... 5... month... 29... day... 81... year under the business name of Rosencrantz-Bemis Ent. by (signature) Rose Dodson							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	5	Top soil	120	163	Sandy clay
		5	10	Dark brown clay	163	165	Sand and gravel
		10	30	Light brown clay	165	168	Sandy clay
		30	50	Reddish brown clay	168	172	Sand and gravel
		50	65	Sandy clay	172	183	Brown clay
		65	85	Sand and gravel	183	217	Sand and gravel
		85	95	Green clay w/some gravel			
		95	100	Brown clay w/gravel	217	220	Shale
		100	115	Clay w/streaks of gravel			
		115	120	Blue gray clay			
ELEVATION:		120	163	Sandy clay			
Depth(s) Groundwater Encountered 1... 28... ft. 2... ft. 3... ft. 4... ft. (Use a second sheet if needed)							
INSTRUCTIONS: Use typewriter or ball point pen, please press firmly and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.							

OFFICE USE ONLY

T 22

R

16

SEC

34

1/4 1/4 1/4 1/4

## DRILLER'S TEST LOG

Customer Name: ILS Land #75 Date: 3/2/2018  
 Address \_\_\_\_\_ Test No: #1-18  
 County: Pawnee Quarter: SE Section: 34 Township: 22 Range: 16

Drilled Footage		Description of Strata	Indicate Test Location by an X			
From	To					
0	2	Top soil				
2	10	Brown clay				
10	52	Soft sandy clay				
52	62	Soft cemented sand				
62	85	Sand & gravel- small med clean coarse loose				
85	89	Green gray tinted clay				
89	110	Tan clay				
110	152	Green gray tan clay				
152	155	Cemented sand streaks				
155	165	Green gray clay				
165	180	Gravel- fine to small clean				
180	184	Tan clay	Static Water Level: _____ Ft			
184	215	Sand & gravel- med clean coarse w/ broken rock (ironated)	Remarks: _____			
215	220	Gray shale				
			<b>Garmin GPS- Nad 83</b>			
			Latitude: 38.0945 N			
			Longitude: 99.0634 W			
			Elevation: _____			
			<b>RECEIVED</b>			
			<b>MAR 07 2018</b>			
			Stafford Field Office DIVISION OF WATER RESOURCES			
			Driller: <u>Luis Luna</u>			
			Spot Location: <u>NE/ NW/ SE</u>			

**ROSENCRANTZ-BEMIS EQUIPMENT CO., INC**  
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