

1 LOCATION OF WATER WELL: County: Wabaunsee	Fraction SW 1/4 NW 1/4 SE 1/4	Section Number 30	Township Number T 10 S	Range Number R 10 EW
---	---	-----------------------------	----------------------------------	---

Distance and direction from nearest town or city street address of well if located within city?
North East Corner of Wabaunsee, KS., on K-18

2 WATER WELL OWNER: **Robert Mertz**
 RR#, St. Address, Box #: **7280 Zeandale Rd.**
 City, State, ZIP Code: **Manhattan, KS 66502**
 Board of Agriculture, Division of Water Resources
 Application Number: **9667**

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF COMPLETED WELL: 57 ft. ELEVATION:
	Depth(s) Groundwater Encountered 40 ft. 2. ft. 3. 21 ft.
	WELL'S STATIC WATER LEVEL 40 ft. below land surface measured on 6-21-07 Pump test data: Well water was 45 ft. after 1 hours pumping 400 gpm Est. Yield 750 gpm: Well water was 49 ft. after 1 hours pumping 600 gpm Bore Hole Diameter: 32 in. to 57 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) <u>2 Irrigation</u> 4 Industrial 7 Lawn and garden only 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes.....No <input checked="" type="checkbox"/> ; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes No <input checked="" type="checkbox"/>

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded

Blank casing diameter: **16** in. to **37** ft., Dia in. to ft., Dia in. to ft.
 Casing height above land surface: **12** in., weight lbs./ft. Wall thickness or gauge No. **.50**

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify)

SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify)

SCREEN-PERFORATED INTERVALS: From **37** ft. to **57** ft., From ft. to ft.
 GRAVEL PACK INTERVALS: From **0** ft. to **20** ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout intervals: From **0** ft. to **20** ft., From ft. to ft.

What is the nearest source of possible contamination:
 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)
 13 Insecticide storage

Direction from well? **West** How many feet? **60'**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	24	Brown Clay			
24	26	Fine Sand & Brown Clay			
26	28	Fine Medium Brown Sand & Brown Clay			
28	30	Medium Sand			
30	34	Medium-Large Sand & Gravel			
34	36	Coarse Sand & Gravel			
36	48	Medium Sand & Gravel			
48	56	Medium-Coarse Sand			
56	57	Medium-Coarse Gravel			
	57	Shale, Stopped			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **6-22-07** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **323** This Water Well Record was completed on (mo/day/yr) **6-25-07** under the business name of **Hoobler Drilling Co.** by (signature) *[Signature]*

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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T R EW SEC. 1/4 1/4 1/4