

1 LOCATION OF WATER WELL: County: WABAUNSEE	Fraction NE 1/4 SW 1/4 SE 1/4	Section Number 17	Township Number T 10 S	Range Number R 12 E
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Distance and direction from nearest town or city street address of well if located within city?
WEST OF ST. MARYS KS., 3/4 MILES ON WHITESANDS RD. & 1/4 MILE SOUTH.

2 WATER WELL OWNER: DAN BRUNIN RR#, St. Address, Box # : 16426 NORTHWEST 70TH City, State, ZIP Code : ROSSVILLE, KS. 66533	Board of Agriculture, Division of Water Resources Application Number: 44994
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL 49 ft. ELEVATION: _____
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Depth(s) Groundwater Encountered 1. **19** ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL **19** ft. below land surface measured on mo/day/yr **4-27-03**

Pump test data: Well water was **26** ft. after **1** hours pumping **600** gpm
 Est. Yield **800** gpm: Well water was **35** ft. after **2** hours pumping **750** gpm

Bore Hole Diameter **36** in. to **49** 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
2 Irrigation	4 Industrial	7 Lawn and garden only
9 Dewatering	12 Other (Specify below)	

Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X**; If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes _____ No **X**

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued X Clamped X
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
2 PVC	4 ABS	7 Fiberglass	10 Asbestos-cement
Blank casing diameter 16 in. to 29 ft., Dia _____ in. to _____ ft.			11 Other (specify) _____
Casing height above land surface 12 in., weight _____ lbs./ft. Wall thickness or gauge No. .50			12 None used (open hole)
TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC			
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS
SCREEN OR PERFORATION OPENINGS ARE:			
1 Continuous slot	3 Mill slot	5 Gauzed wrapped	8 Saw cut
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes
7 Torch cut	10 Other (specify) _____	11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From 29 ft. to 49 ft., From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS: From 20 ft. to 49 ft., From _____ ft. to _____ ft.			

6 GROUT MATERIAL:	1 Neat cement	2 <u>Cement grout</u>	3 Bentonite	4 Other _____
Grout Intervals: From 0 ft. to 20 ft., From _____ ft. to _____ 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	NONE
Direction from well?			How many feet?	

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	TOP SOIL			
2	11	SILT			
11	22	SMALL BROWN SAND			
22	25	MEDIUM BROWN GRAVEL			
25	27	MEDIUM-LARGE BROWN GRAVEL			
27	29	MEDIUM-LARGE GREY GRAVEL & GREY CLAY			
29	30	SMALL MEDIUM GREY GRAVEL			
30	49	MEDIUM-LARGE GREY GRAVEL			
	49	SHALE, STOPPED			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 4-29-03 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) 5-28-03 under the business name of HOUBLER DRILLING CO. by (signature) _____
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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.

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