

1	LOCATION OF WATER WELL: Fraction	Section Number	Township Number	Range Number
County: <u>RELAY</u>	<u>SW 1/4 SW 1/4 SW 1/4</u>	<u>3</u>	T <u>10</u> S	R <u>7</u> <u>EW</u>

Distance and direction from nearest town or city street address of well if located within city?

1 MILE WEST OF MANHATTAN ON #1 FEDERAL HIGHWAY OF COLBERT HALLS GOLF COURSE

2 WATER WELL OWNER: DR. JAMES McATEE  
 RR#, St. Address, Box # : 1600 CHARLES PL.  
 City, State, ZIP Code : MANHATTAN, KS. 66502  
 Board of Agriculture, Division of Water Resources  
 Application Number: \_\_\_\_\_

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N			
---	NW	---	NE
W			E
---	SW	---	SE
	X		
	S		

4 DEPTH OF COMPLETED WELL ..... 200 ..... ft. ELEVATION: \_\_\_\_\_  
 Depth(s) Groundwater Encountered 1 ..... 116 ..... ft. 2 ..... 96 ..... ft. 3 ..... ft.  
 WELL'S STATIC WATER LEVEL ..... ft. below land surface measured on mo/day/yr .....  
 Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield ..... 20 ..... gpm Well water was ..... ft. after ..... hours pumping ..... gpm  
 WELL WATER TO BE USED AS:  
 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public water supply 6 Oil field water supply 7 Domestic (lawn & garden) 8 Air conditioning 9 Dewatering 10 Monitoring well 11 Injection well 12 Other (Specify below) CLOSED LOOP GEOTHERMAL

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:  
 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) NDPA  
 CASING JOINTS: Glued ..... Clamped ..... Welded X ..... Threaded .....

Blank casing diameter ..... 3/4 ..... in. to 200 ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface 60 ..... in., weight ..... lbs./ft. Wall thickness or gauge No. SDR11

TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 2 Brass 3 Stainless Steel 4 Galvanized Steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-Cement 11 Other (Specify) ..... 12 None used (open hole)

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

SCREEN-PERFORATED INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

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

Grout Intervals: From 5 ..... ft. to 200 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

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

Direction from well? EAST How many feet? 20

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	4	SHALE, TAN	134	168	SHALE, GRAY
4	7	LEAMINGTON	168	168	LEAMINGTON
7	18	SHALE, GRAY	168	191	SHALE, GRAY
18	27	LEAMINGTON	191	194	LEAMINGTON
27	35	SHALE, GRAY	194	200	SHALE, GRAY
35	38	LEAMINGTON			
38	60	SHALE, GRAY			
60	65	LEAMINGTON			
65	83	SHALE, GRAY GRABBS TO ROAD			
83	96	LEAMINGTON, H <sub>2</sub> O			
96	112	SHALE, GRAY			16 HOLES TO 200 FEET
112	116	LEAMINGTON, H <sub>2</sub> O			
116	131	SHALE, GRAY			
131	134	LEAMINGTON			

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) ..... 8/30/05 ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. 760 ..... This Water Well Record was completed on (mo/day/yr) ..... 9/23/05 ..... under the business name of ASSOCIATED DRILLING CO. LLC 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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.