

1 LOCATION OF WATER WELL: County: POSS Fraction: NE 1/4 NE 1/4 SW 1/4 Section Number: 11 Township Number: T 10 S. Range Number: R 8 EW

Distance and direction from nearest town or city street address of well if located within city? East on 24 Hwy South Side of Hwy from Manhattan Co. 4 miles

2 WATER WELL OWNER: Pioneer Farm Cont'l
 RR#, St. Address, Box # : East Hwy 24
 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		X		E
	-SW-		-SE-	
S				

4 DEPTH OF COMPLETED WELL: 42 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered: 1 ft. 22 ft. 3 ft. 42 ft.
 WELL'S STATIC WATER LEVEL: 19 ft. below land surface measured on mo/day/yr
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield: 60 gpm; Well water was _____ ft. after _____ hours pumping _____ gpm
 WELL WATER TO BE USED AS:
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well

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

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 5" 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing diameter: 5" in. to 22 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 1' in., weight 54.40 lbs./ft. Wall thickness or gauge No. _____
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 10 Asbestos-Cement
 2 Brass 4 Galvanized Steel 6 Concrete tile 9 ABS 11 Other (Specify) _____
 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 3 Mill slot 10 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 500-550 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify) _____ ft.
 SCREEN-PERFORATED INTERVALS: From 22 ft. to 42 ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 22 ft. to 42 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout intervals: From 8 ft. to 22 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
 Direction from well? South How many feet? 150'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Top Soil			
1	22	Dark Grey			
22	28	Fine Sand			
28	40	Coarse Sandstone			

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) 6/19/2006 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. 451 This Water Well Record was completed on (mo/day/yr) 6/30/2006 under the business name of Haldeman and Dr. May by 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.