

1 LOCATION OF WATER WELL: Fraction: NE 1/4 SE 1/4 NE 1/4 Section Number: 33 Township Number: 11 Range Number: 15 East
 County: Shawnee

Distance and direction from the nearest town, or city street address of well, if in city?
 In grass near post sign

2 WATER WELL OWNER: EZ Shop, Inc. #10 WELL ID: MW4
 Address, Box #: 841 SW Fairlawn Rd. Board of Agriculture, Division of Water Resources
 City, State, Zip Code: Topeka, KS 66609 Application Number:

3 LOCATE WELL WITH AN 'X'
 4 DEPTH WELL COMPLETED: 20' ft. ELEVATION: (TOC)
 Depth(s) Groundwater Encountered:
 WELL'S STATIC WATER LEVEL: _____ feet below land surface measured on month/day/year _____
 Pump test data: all water was _____ feet after _____ hours _____ gpm
 Est. Yield _____ Well water was _____ feet after _____ hours _____ gpm
 Bore Diam. _____ inches to _____ feet, and _____ hours _____ feet
 WELL WATER TO BE USED AS: 5 PWS 8 air condition 11 injection
 1 domestic 3 feedlot 6 oil field 9 dewatering 12 other (specify)
 2 irrigation 4 industrial 7 lawn/garden 10 monitoring well
 Was a chemical / bacteriological sample submitted Department? _____ yes _____ no X
 If yes, month/day/year sample was submitted _____ Well Disinfected? _____ yes _____ no X

5 TYPE OF BLANK CASING:
 1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS:
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other Glued _____ Welded _____
 Blank casing diameter _____ 2 inches to _____ 5 feet, Diam. _____ inches to _____ feet
 Casing height above land surface _____ 0 inches, weight _____ lbs./feet Wall thickness or gauge No. 40
 Clamped _____ Threaded X

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 8 RMP (SR) 11 Other (specify)

SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 3 3/8" 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 INTERVALS: from: 5 feet to 20 feet from: _____ feet to _____ feet
 from: _____ feet to _____ feet from: _____ feet to _____ feet
 GR. PACK INTERVALS: from: 3 feet to 20 feet from: _____ feet to _____ feet
 from: _____ feet to _____ feet from: _____ feet to _____ feet

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout X 3 Bentonite X
 Grout intervals: from 0 feet to 1 feet, from 1 feet to 3 feet

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

Direction from well? _____ How many feet (approximate)? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	0.5	Top soil			
0.5	7	Clay, silt, very dark brown, rust mottles, moist			
7	12	Clay, silt, orange brown, moist			
12	20	orange, shale, brown, moist, platy			

WELL ID: MW4
 WELL TAG: 00127370
 VARIANCE BY: D. Taylor

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 (mth/day/yr) 5/23/95 and this record is true to the best of my knowledge and belief. Kansas Water
 Well Contractor's License Number 527 This Water Well Record was completed on (mo/dy/yr) 5/30/95
 under the business name: GeoCore Services Inc. by signature: *Dan Ball*

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 to Kansas Dept. of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: (913) 296-5545. Send one to Well Owner and retain one for your records.