

1	LOCATION OF WATER WELL: County: Shawnee	Fraction NW 1/4 NW 1/4 NW 1/4	Section Number 32	Township Number T 11 S	Range Number R 16 <u>EW</u>
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Distance and direction from nearest town or city street address of well if located within city?

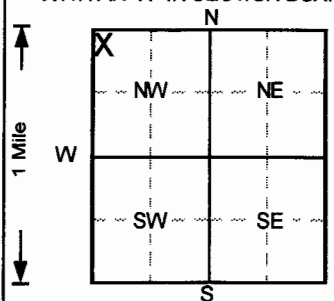
134 SE Quincy, Topeka

2 WATER WELL OWNER: **Scotch Industries, Inc.**

RR#, St. Address, Box # : **1029 New Hampshire St.**
City, State, ZIP Code : **Lawrence, KS 66044**

Board of Agriculture, Division of Water Resources
Application Number:

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



4 DEPTH OF COMPLETED WELL **32** ft. ELEVATION:

Depth(s) Groundwater Encountered 1..... **15** ft. 2..... ft. 3..... ft.

WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr

Pump test data: Well water was **NA** ft. after hours pumping gpm

Est. Yield **NA** gpm: Well water was ft. after hours pumping gpm

Bore Hole Diameter **11** in. to **32** 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)**
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well **Soil vapor extractio**

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 6 Asbestos-Cement 9 Other (specify below) Welded
7 Fiberglass Threaded

Blank casing diameter **4** in. to **12** ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface **0** in., weight lbs./ft. Wall thickness or gauge No. **Sch. 40**

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

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

SCREEN-PERFORATED INTERVALS: From **12** ft to **32** ft, From ft to ft
From ft to ft, From ft to ft

GRAVEL PACK INTERVALS: From **9** ft to **32** ft, 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 **1** ft to **3** ft, From **3** ft to **9** 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? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	8	Clay backfill, silty,			
8	32	Sand backfill, med.,			
					SVE3, Flushmount

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) **6/23/2010** and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. **527** This Water Well Record was completed on (mo/day/yr) **7/22/2010**
under the business name of **GeoCore, Inc.** by (signature) *Dale Bell*

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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