

1 LOCATION OF WATER WELL: County: Dickinson Fraction: NW 1/4 NW 1/4 NE 1/4 Section Number: 20 Township Number: T 11 S Range Number: R 4 E

Distance and direction from nearest town or city street address of well if located within city?  
8 miles North of Chapman, Ks & 1/2 mile East on 3400 Ave.

2 WATER WELL OWNER: Sam Gfeller  
 RR#, St. Address, Box # : 2064 - 3400 Ave. Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : Chapman, Kansas 67431 Application Number:

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

4 DEPTH OF COMPLETED WELL: 122 ft. ELEVATION: .....  
 Depth(s) Groundwater Encountered 1. 75' 2. 94' 3. .... ft.  
 WELL'S STATIC WATER LEVEL 75' 6" ft. below land surface measured on mo/day/yr 4 / 27 / 96  
 Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield 20+ gpm: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Bore Hole Diameter 9 in. to 122 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  
 Was a chemical/bacteriological sample submitted to Department? Yes.....No.....\*  
 If yes, mo/day/yr sample was sub-mitted 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 5 in. to 122 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface 24 in., weight 160 lbs./ft. Wall thickness or gauge No. 214  
 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:  
 1 Continuous slot 3 Mill 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-PERFORATED INTERVALS: From 86 ft. to 112 ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From 25 ft. to 122 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 5 ft. to 25 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? NORTHEAST WILL BE APPROX How many feet? 150

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	4	BROWN CLAY	75	86	LITE COLOR LIMESTONE
4	7	TAN CLAY	86	93	LITE COLOR SHALEY CLAY
7	15	RED CLAY	93	95	LITE COLOR LIMESTONE
15	27	TAN CLAY & LITE COLOR <del>LIMESTONE</del> <sup>CLAY</sup>	95	112	LITE COLOR SHALEY CLAY
27	33	LITE COLOR LIMESTONE	112	122	RED SHALEY CLAY
33	36	LITE COLOR SHALEY CLAY			
36	42	LITE GRAY CLAY			
42	45	LITE COLOR LIMESTONE			
45	48	LITE COLOR SHALEY CLAY			
48	63	RED CLAY			
63	68	LITE GRAY SHALEY CLAY			
68	69	LITE COLOR LIMESTONE			
69	71	LITE COLOR SHALE			
71	74	LITE COLOR LIMESTONE			
74	75	LITE COLOR SHALE			

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) 4 / 27 / 96 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 397 This Water Well Record was completed on (mo/day/yr) 4 / 29 / 96 under the business name of CENTRAL KANSAS DRILLING by (signature) Harold Martin

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.