

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Riley</u>		<u>NN 1/4 NW 1/4 NWS 1/4</u>	<u>18</u>	<u>T 11 S</u>	<u>R 7 E</u>
Distance and direction from nearest town or city street address of well if located within city?					
<u>SE. FUNSTON LANDFILL MW 1</u>					
2 WATER WELL OWNER: <u>U.S. Army</u>					
RR#, St. Address, Box # : <u>DEH</u>					
City, State, ZIP Code : <u># Riley KS 66442</u>					
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: <u>20</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL ... <u>13</u> ... ft. below land surface measured on mo/day/yr			
		Pump test data: Well water was ft. after hours pumping gpm			
		Est. Yield gpm: Well water was ft. after hours pumping gpm			
		Bore Hole Diameter ... <u>2</u> ... in. to ft., and in. to ft.			
WELL WATER TO BE USED AS:					
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 11 Injection well 2 Irrigation 4 Industrial 7 Lawn and garden only <u>10 Monitoring well</u> 12 Other (Specify below)					
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 ... <u>2</u> ... in. to ... <u>10</u> ... ft., Dia ... in. to ... ft., Dia ... in. to ... ft.					
Casing height above land surface ... <u>30</u> ... in., weight ... lbs./ft. Wall thickness or gauge No.					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
<u>1 Steel</u> 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) 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 <u>6 Wire wrapped</u> 9 Drilled holes 7 Torch cut 10 Other (specify)					
SCREEN-PERFORATED INTERVALS: From ... <u>10</u> ... ft. to ... <u>20</u> ... ft., From ... ft. to ... ft.					
GRAVEL PACK INTERVALS: From ... <u>N/A</u> ... ft. to ... ft., From ... ft. to ... ft.					
6 GROUT MATERIAL:					
Grout Intervals: From ... <u>0</u> ... ft. to ... <u>8</u> ... 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) <u>LAND FILL</u> 13 Insecticide storage					
Direction from well? How many feet?					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>TA</u>	<u>SILTY SAND</u>			
NOTE: DRIVE PT					
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) ... <u>8/19/94</u> ... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>581 102</u> This Water Well Record was completed on (mo/day/yr) ... <u>8/19/94</u> ... under the business name of <u>Layne Wichita</u> by signature <u>[Signature]</u>					
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.					