

1 LOCATION OF WATER WELL: County: <u>Shawnee</u>	Fraction: <u>SE 1/4 NE 1/4 NE 1/2</u>	Section Number: <u>24</u>	Township Number: <u>12</u>	Range Number: <u>15 East</u>
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Distance and direction from the nearest town, or city street address of well, if in city?
45' E and 90' S of NE corner of main UST basin

2 WATER WELL OWNER: <u>Ed Bozarth Chevrolet, Inc.</u> Address, Box #: <u>3731 South Topeka Blvd.</u> City, State, Zip Code: <u>Topeka, KS 66609</u>	WELL ID: <u>MW3</u> Board of Agriculture, Division of Water Resources Application Number: _____
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3 LOCATE WELL WITH AN "X"	4 DEPTH WELL COMPLETED: <u>12'</u> 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:	6 CASING JOINTS:		
1 Steel _____	3 RMP (SR) _____	5 Wrought Iron _____	8 Concrete tile _____
2 PVC _____	4 ABS _____	6 Asbestos-Cement _____	9 Other _____
		7 Fiberglass _____	Glued _____ Welded _____
			Clamped _____ Threaded X _____
Blank casing diameter <u>2</u> inches to <u>2</u> feet, Diam. _____ inches to _____ feet	Casing height above land surface <u>0</u> inches, weight _____ lbs./foot Wall thickness or gauge No. <u>40</u>		

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 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 INTERVALS: from: 2 feet to 12 feet from: _____ feet to _____ feet

GR. PACK INTERVALS: from: 1.5 feet to 12 feet from: _____ feet to _____ feet

6 GROUT MATERIAL:	1 Neat cement _____	2 Cement grout X _____	3 Bentonite _____
Grout Intervals: from <u>0</u> feet to <u>1.5</u> feet, from _____ feet to _____ 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	6'	Asphalt			
6'	2'	Fill material, clay, brown			
2'	6'	Limestone, tan to gray, dry			
6'	6.5'	Clay, brown with gray, moist			
6.5'	7.5'	Coal, black			
7.5'	12'	Shale, highly weathered, brown to orange, brown grading to gray			
					WELL ID: <u>MW3</u>
					WELL TAG #: <u>00116R37</u>
					VARIANCE BY: <u>D. Taylor</u>

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was: <u>1) constructed,</u> 2)reconstructed, or 3)plugged under my jurisdiction and was completed on (mth/day/yr) <u>5/8/95</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License Number <u>527</u> . This Water Well Record was completed on (mo/dy/yr) <u>5/31/95</u> under the business name: <u>GeoCore Services Inc.</u> by (signature) <u>Dale Kott</u>
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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 Depart. of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: (913) 296-5545. Send one to Well Owner and retain one for y