

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Shawnee</u>		<u>SE 1/4 NE 1/4 NE 1/4</u>	<u>5</u>	<u>T 12 S</u>	<u>R 15 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>CONDICO #16004 1531 Southwest Wanamaker Topeka</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box #		Application Number:			
City, State, ZIP Code					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL			
		18.5 ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>14</u> ft. 2. <u>14</u> ft. 3. <u>14</u> ft.			
		WELL'S STATIC WATER LEVEL <u>10.14</u> ft. below land surface measured on mo/day/yr <u>9-4-97</u>			
		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>8</u> in. to <u>18.5</u> 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 <u>No</u> If yes, mo/day/yr sample was submitted _____			
		Water Well Disinfected? Yes <u>No</u>			
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>8.5</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.					
Casing height above land surface <u>0</u> in., weight _____ lbs./ft. Wall thickness or gauge No. _____					
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) _____ 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 <u>8.5</u> ft. to <u>18.5</u> ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS:					
From <u>7.5</u> ft. to <u>18.5</u> ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL:					
1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Intervals: From <u>5.5</u> ft. to <u>7.5</u> 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? <u>At well</u> How many feet? <u>0</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>0.5</u>	<u>concrete</u>			
<u>0.5</u>	<u>1.0</u>	<u>brave</u>			
<u>1.0</u>	<u>5.5</u>	<u>fill- weathered shale, fat clay</u>			
<u>8.5</u>	<u>10.5</u>	<u>silty fat clay</u>			
<u>13.5</u>	<u>15.5</u>	<u>silty fat clay with sandstone fragments</u>			
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>9-3-97</u> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <u>414</u> This Water Well Record was completed on (mo/day/yr) <u>9-3-97</u>					
under the business name of <u>Maxim Technologies, Inc.</u> by (signature) <u>[Signature]</u>					