

1 LOCATION OF WATER WELL: County: Douglas		Fraction NW $\frac{1}{4}$ SW $\frac{1}{4}$ SE $\frac{1}{4}$	Section Number 25	Township Number T 12 S	Range Number R 19 EW
Distance and direction from nearest town or city street address of well if located within city? 1306 W. 6th Street, Lawrence, Kansas					
2 WATER WELL OWNER: Jayhawk Oil Company					
RR#, St. Address, Box # : P.O. Box 4058			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : Lawrence, Kansas 66046			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 35.0 ft. ELEVATION: _____			
		Depth(s) Groundwater Encountered 1 18.0 ft. 2 _____ ft. 3 _____ ft.			
		WELL'S STATIC WATER LEVEL 22.15 ft. below land surface measured on mo/day/yr 03/27/08			
Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm					
Est. Yield NA gpm: Well water was _____ ft. after _____ hours pumping _____ gpm					
Bore Hole Diameter 8.5 in. to 35.0 ft. and _____ in. to _____ ft.					
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well					
1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)					
2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well					
Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was submitted					
Water Well Disinfected? Yes _____ No X					
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought Iron	
2 PVC		4 ABS		8 Concrete tile	
Blank casing diameter 2.375 in. to 10.0 ft., Dia		_____ in. to _____ ft., Dia		CASING JOINTS: Glued _____ Clamped _____	
Casing height above land surface Flush Mount in., weight _____ lbs./ft.		_____ in., weight _____ lbs./ft.		Welded _____ Threaded X	
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		7 PVC	
2 Brass		4 Galvanized steel		8 RMP (SR)	
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped		8 Saw cut	
1 Continuous slot		3 Mill slot		9 Drilled holes	
2 Louvered shutter		4 Key punched		10 Other (specify) _____	
SCREEN-PERFORATED INTERVALS:		From 35.0 ft. to 10.0 ft.		From _____ ft. to _____ ft.	
GRAVEL PACK INTERVALS:		From 35.0 ft. to 9.0 ft.		From _____ ft. to _____ 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 0.0 ft. to 1.5 ft. From 1.5 ft. to 9.0 ft. From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
1 Septic tank		4 Lateral lines		7 Pit privy	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
Direction from well? Southwest		How many feet? 185		10 Livestock pens	
				11 Fuel storage (former)	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/ Gas well	
				16 Other (specify below) _____	
LITHOLOGIC LOG					
FROM	TO	CODE			
0.0	6.0		Fill material; dark brown silty clay, rock and brick fragments, firm, moist		
6.0	8.5		Brown-yellow brown silty clay, slightly mottled black, slightly gravelly, firm, moist		
8.5	13.0		Brown-orange brown silty clay, trace black mottling and gravel, firm, moist		
13.0	18.0		Brown-yellow brown very silty clay, firm, slightly moist		
18.0	25.0		Brown-yellow brown very silty clay, firm, very moist		
25.0	28.0		Brown-yellow brown very silty, sandy clay, saturated		
28.0	35.0		Brown-yellow brown very silty clay, slightly sandy, firm, very moist-moist		
Flush-mount well completion waiver existent for site.					
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/yr) 03/26/08 and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. 692			This Water Well Record was completed on (mo/day/yr) 03/27/08		
under the business name of Quad State Services, Inc.			by (signature)		
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

T
R

SEC