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|---|--------------------------------------|--|-------------------------------|-----------------------------|--------------------|
| 1 LOCATION OF WATER WELL: County: <u>Wabunsee</u> | Fraction <u>NW 1/4 SW 1/4 NE 1/4</u> | Section Number <u>30</u> | Township Number <u>T 12 S</u> | Range Number <u>R 9 E/W</u> | |
| Distance and direction from nearest town or city street address of well if located within city? <u>From Manhattan 60 South on Drip Creek Rd 12 miles then 60 West 2 miles & 1/2 mile South on Little Ford Rd.</u> | | | | | |
| 2 WATER WELL OWNER: <u>Colin Murphy</u> RR#, St. Address, Box # : <u>26801 Little Ford Road</u> City, State, ZIP Code : <u>Alma, KS 66407</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 _____ ft. ELEVATION: _____ | | | |
| | | Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL _____ 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 WELL WATER TO BE USED AS: <input checked="" type="checkbox"/> 1 Domestic <input type="checkbox"/> 3 Feedlot <input type="checkbox"/> 6 Oil field water supply <input type="checkbox"/> 9 Dewatering <input type="checkbox"/> 12 Other (Specify below) <input type="checkbox"/> 2 Irrigation <input type="checkbox"/> 4 Industrial <input type="checkbox"/> 7 Domestic (lawn & garden) <input type="checkbox"/> 10 Monitoring well | | | |
| | | Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| 5 TYPE OF BLANK CASING USED: | | | | | |
| <input checked="" type="checkbox"/> 1 Steel <input type="checkbox"/> 3 RMP (SR) <input checked="" type="checkbox"/> 2 PVC <input type="checkbox"/> 4 ABS | | <input type="checkbox"/> 5 Wrought iron <input type="checkbox"/> 8 Concrete tile CASING JOINTS: <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> 6 Asbestos-Cement <input type="checkbox"/> 9 Other (specify below) <input type="checkbox"/> Welded <input type="checkbox"/> 7 Fiberglass <input type="checkbox"/> Threaded | | | |
| Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft. | | | | | |
| Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. _____ | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | |
| <input type="checkbox"/> 1 Steel <input type="checkbox"/> 3 Stainless Steel <input type="checkbox"/> 5 Fiberglass <input checked="" type="checkbox"/> 8 RMP (SR) <input type="checkbox"/> 2 Brass <input type="checkbox"/> 4 Galvanized Steel <input type="checkbox"/> 6 Concrete tile <input type="checkbox"/> 9 ABS | | <input type="checkbox"/> 10 Asbestos-Cement <input type="checkbox"/> 11 Other (Specify) _____ <input type="checkbox"/> 12 None used (open hole) | | | |
| SCREEN OR PERFORATION OPENINGS ARE: <u>25/1000"</u> | | | | | |
| <input type="checkbox"/> 1 Continuous slot <input checked="" type="checkbox"/> 3 Mill slot <input type="checkbox"/> 5 Gauzed wrapped <input type="checkbox"/> 2 Louvered shutter <input type="checkbox"/> 4 Key punched <input type="checkbox"/> 6 Wire wrapped <input type="checkbox"/> 7 Torch cut <input type="checkbox"/> 8 Saw cut <input type="checkbox"/> 11 None (open hole) | | <input type="checkbox"/> 9 Drilled holes <input type="checkbox"/> 10 Other (specify) _____ ft. | | | |
| SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft. | | | | | |
| GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft. | | | | | |
| 6 GROUT MATERIAL: <input type="checkbox"/> 1 Neat cement <input type="checkbox"/> 2 Cement grout <input checked="" type="checkbox"/> 3 Bentonite <input type="checkbox"/> 4 Other _____ | | | | | |
| Grout Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft. | | | | | |
| What is the nearest source of possible contamination: <u>None Close</u> | | | | | |
| <input type="checkbox"/> 1 Septic tank <input type="checkbox"/> 4 Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> 2 Sewer lines <input type="checkbox"/> 5 Cess pool <input type="checkbox"/> 8 Sewage lagoon <input type="checkbox"/> 3 Watertight sewer lines <input type="checkbox"/> 6 Seepage pit <input type="checkbox"/> 9 Feedyard | | <input type="checkbox"/> 10 Livestock pens <input type="checkbox"/> 14 Abandoned water well <input type="checkbox"/> 11 Fuel storage <input type="checkbox"/> 15 Oil well/Gas well <input type="checkbox"/> 12 Fertilizer storage <input type="checkbox"/> 16 Other (specify below) _____ <input type="checkbox"/> 13 Insecticide storage | | | |
| Direction from well? | | How many feet? | | | |
| FROM | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
| 0 | 1 | Top Soil | | | |
| 1 | 6 | Brown clay | | | |
| 6 | 12 | Limestone | | | |
| 12 | 23 | Grey Shale | | | |
| 23 | 26 | Limestone | | | |
| 26 | 38 | Grey Shale | | | |
| 38 | 42 | Limestone | | | |
| 42 | 56 | Brown Shale | | | |
| 56 | 81 | Limestone | | | |
| 81 | 83 | Grey Shale | | | |
| 83 | 100 | Limestone | | | |
| 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>1/4/2005</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. <u>451</u> This Water Well Record was completed on (mo/day/yr) <u>1/28/2005</u> under the business name of <u>Naldiman Ave Drilling</u> by (signature) <u>Craig J. Coda</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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. | | | | | |