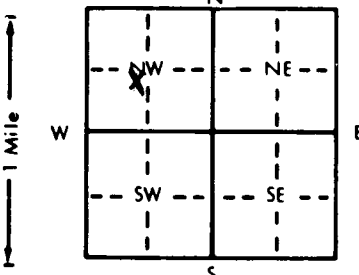


mw-1

1 LOCATION OF WATER WELL: County: **Wabaunsee** Fraction: **NE** $\frac{1}{4}$ **SW** $\frac{1}{4}$ **NW** $\frac{1}{4}$ Section Number: **34** Township Number: **T 14 S** Range Number: **R 13** (**E/W**)

Distance and direction from nearest town or city street address of well if located within city?
2nd + Main Harveyville, ks

2 WATER WELL OWNER: **Robert Carrier**
 RR#, St. Address, Box #: **Box 123, Harveyville, Ks 66413**
 City, State, ZIP Code: **Harveyville, Ks 66413**
 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: **24.5** ft. ELEVATION: **-----**
 Depth(s) Groundwater Encountered: 1. **19** ft. 2. **-----** ft. 3. **-----** ft.
 WELL'S STATIC WATER LEVEL: **7.5** ft. below land surface measured on mo/day/yr **11-26-97**
 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: **8.625** in. to **24.5** ft., and **-----** in. to **-----** ft.
 WELL WATER TO BE USED AS:
 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** **mw-1**
 5 Public water supply 8 Air conditioning 11 Injection 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 8 Concrete tile CASING JOINTS: Glued Clamped
2 PVC 4 ABS 7 Fiberglass 9 Other (specify below) Welded
 Blank casing diameter: **2** in. to **14.5** ft. Dia **-----** in. to **-----** ft. Dia **-----** in. to **-----** ft.
 Casing height above land surface: **0** in. weight **SCH. 40 PVC** lbs./ft. Wall thickness or gauge No. **-----**
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 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
 3 Other (specify) 7 Torch cut 10 Other (specify)
 SCREEN-PERFORATED INTERVALS: From **14.5** ft. to **24.5** ft., From **-----** ft. to **-----** ft., From **-----** ft. to **-----** ft.
SAND
 GRAVEL PACK INTERVALS: From **13.5** ft. to **24.5** 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 **20** ft. to **11.5** ft., From **3** ft. to **11.5** ft., From **13.5** 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 **cont. site**
 Direction from well? **-----** How many feet? **-----**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
GL	0.50	Gravel			
0.50	22.00	Silty Clay (CL)			
22.00	24.50	Shale, weathered			
24.50	TD	End of Borehole			

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) **11-20-97** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **585** This Water Well Record was completed on (mo/day/yr) **12-3-97** under the business name of **AET** by (signature) **D. Johnson for D. Duncan**

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.

OFFICE USE ONLY
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