

1 LOCATION OF WATER WELL: County: <b>Osage</b>	Fraction <b>SW ¼ NW ¼ NW ¼</b>	Section Number <b>26</b>	Township Number T <b>16</b> S	Range Number R <b>14</b> E
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Distance and direction from nearest town or city street address of well if located within city?  
**110 Market St., Osage City, KS**

2 WATER WELL OWNER: **Haag Oil Company**  
 RR#, St. Address, Box # : **326 SE 15<sup>th</sup> St**  
 City, State, ZIP Code : **Topeka, KS 66607**  
 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 <b>20</b> ft. ELEVATION: <b>1085.67</b> Depth(s) Groundwater Encountered 11.5 <b>5.04</b> ft. 2 _____ ft. 3 _____ Ft. WELL'S STATIC WATER LEVEL <b>5.37</b> ft. below land surface measured on mo/day/yr <b>03/22/11</b> 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 <b>8.625</b> In. to <b>20</b> 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 <b>Monitoring well</b> <b>MW-3</b> Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b> If yes, mo/day/yr sample was Submitted _____ Water Well Disinfected? Yes _____ No <b>X</b>
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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** **X**

Blank casing diameter **2** in. to **5** Ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface **FLUSH** In., weight **SCH 40** 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 **5** ft. to **20** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 SAND PACK INTERVALS: From **3** ft. to **20** 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 2 **0.5** ft. to **1** Ft. From 3 **1** Ft. to **3** 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)**  
**Contaminated Site**

Direction from well? \_\_\_\_\_ How many feet? \_\_\_\_\_

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.5		Grass cover			
0.5	3		Dark brown Silty Clay			
3	5		Reddish brown and grayish Clay			
5	15		Medium brown Clay			
15	20		Medium brown Clay, saturated			
20	TD		End of Borehole			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w  
 Completed on (mo/day/yr) **03/22/11** 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) **04/13/11**  
 under the business name of **Associated Environmental, Inc.** By (signature) **Bradley J. Johnson**  
 INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send 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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