

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Morris</u>		<u>NE 1/4 NE 1/4 NE 1/4</u>	<u>7</u>	T <u>18</u> S <u>8</u>	R <u>8</u> W <u>10</u>
Distance and direction from nearest town or city street address of well if located within city? <u>From Council Grove to North West</u>					
<u>3.5 Miles on County 467 + South 1/2 mile</u>					
2 WATER WELL OWNER: <u>Dr. Coote</u>					
RR#, St. Address, Box #: <u>1708 South West 26th</u>					
City, State, ZIP Code: <u>Topeka, KS 66611</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: <u>140</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>110</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>70</u> ft. below land surface measured on mo/day/yr			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>40</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>9</u> in. to <u>140</u> ft., and _____ in. to _____ ft.			
		WELL WATER TO BE USED AS:			
		1 Domestic <input checked="" type="checkbox"/> 3 Feedlot <input type="checkbox"/> 6 Oil field water supply <input type="checkbox"/> 9 Dewatering <input type="checkbox"/> 12 Other (Specify below) _____ 2 Irrigation <input type="checkbox"/> 4 Industrial <input type="checkbox"/> 7 Lawn and garden only <input type="checkbox"/> 10 Monitoring well <input type="checkbox"/>			
		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:					
1 Steel <input type="checkbox"/> 3 RMP (SR) <input type="checkbox"/> 5 Wrought iron <input type="checkbox"/> 8 Concrete tile <input type="checkbox"/> CASING JOINTS: <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped 2 PVC <input checked="" type="checkbox"/> 4 ABS <input type="checkbox"/> 6 Asbestos-Cement <input type="checkbox"/> 9 Other (specify below) _____ Welded _____ 7 Fiberglass <input type="checkbox"/> Threaded _____					
Blank casing diameter <u>5</u> in. to <u>120</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface <u>2</u> in., weight <u>54.40</u> lbs./ft. Wall thickness or gauge No. _____					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel <input type="checkbox"/> 3 Stainless steel <input type="checkbox"/> 5 Fiberglass <input type="checkbox"/> 8 RMP (SR) <input type="checkbox"/> 11 Other (specify) _____ 2 Brass <input type="checkbox"/> 4 Galvanized steel <input type="checkbox"/> 6 Concrete tile <input type="checkbox"/> 9 ABS <input type="checkbox"/> 12 None used (open hole) _____					
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot <input type="checkbox"/> 3 Mill slot <input checked="" type="checkbox"/> <u>25/1000</u> 5 Gauzed wrapped <input type="checkbox"/> 8 Saw cut <input type="checkbox"/> 11 None (open hole) _____ 2 Louvered shutter <input type="checkbox"/> 4 Key punched <input type="checkbox"/> 6 Wire wrapped <input type="checkbox"/> 9 Drilled holes <input type="checkbox"/> 12 Other (specify) _____ 7 Torch cut <input type="checkbox"/> 10 Other (specify) _____					
SCREEN-PERFORATED INTERVALS: From <u>120</u> ft. to <u>140</u> ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>2.5</u> ft. to <u>140</u> ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement <input type="checkbox"/> 2 Cement grout <input type="checkbox"/> 3 Bentonite <input checked="" type="checkbox"/> 4 Other _____					
Grout Intervals: From <u>0</u> ft. to <u>2.5</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination: <u>None</u>					
1 Septic tank <input type="checkbox"/> 4 Lateral lines <input type="checkbox"/> 7 Pit privy <input type="checkbox"/> 10 Livestock pens <input type="checkbox"/> 14 Abandoned water well <input type="checkbox"/> 2 Sewer lines <input type="checkbox"/> 5 Cess pool <input type="checkbox"/> 8 Sewage lagoon <input type="checkbox"/> 11 Fuel storage <input type="checkbox"/> 15 Oil well/Gas well <input type="checkbox"/> 3 Watertight sewer lines <input type="checkbox"/> 6 Seepage pit <input type="checkbox"/> 9 Feedyard <input type="checkbox"/> 12 Fertilizer storage <input type="checkbox"/> 16 Other (specify below) _____ 13 Insecticide storage <input type="checkbox"/>					
Direction from well? _____ How many feet? _____					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Top Soil	110	127	Limestone (Water)
1	11	Limestone	127	140	Grey shale
11	17	FLINT ROCK			
17	32	Grey shale			
32	44	Brown shale			
44	46	Limestone			
46	57	Grey shale			
57	61	Limestone			
61	86	Grey shale			
86	89	Limestone			
89	94	Grey shale			
94	99	FLINT ROCK			
99	102	Grey shale			
102	104	Limestone			
104	110	Grey shale			
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>9/22/92</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>451</u> This Water Well Record was completed on (mo/day/yr) <u>10/12/92</u> under the business name of <u>Haldema Well Drilling</u> by (signature) <u>Ray H. Coote</u>					