

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Morris</u>		<u>Sw 1/4</u> <u>me 1/4</u> <u>me 1/4</u>	<u>7</u>	T <u>16</u> S	R <u>9</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>134 E 3rd N Council Grove, KS.</u>					
2 WATER WELL OWNER: <u>Morris County Landfill</u>					
RR#, St. Address, Box # : City, State, ZIP Code : <u>Council Grove, KS. 66846</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>38 1/2</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>24</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>22</u> ft. below land surface measured on mo/day/yr <u>3-14-94</u>			
		Bump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>Seep</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>9</u> in. to <u>2 1/2</u> ft., and <u>7</u> in. to <u>4 1/2</u> ft.			
		WELL WATER TO BE USED AS:			
		5 Public water supply 8 Air conditioning 11 Injection well 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 <u>Monitoring well</u>			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr sample was submitted _____			
		Water Well Disinfected? Yes _____ No <u>X</u>			
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 2 <u>PVC</u> 4 <u>ABS</u> 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded _____					
Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface _____ in., weight <u>Sch 40</u> lbs./ft. Wall thickness or gauge No. <u>Sch 40</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass 7 <u>PVC</u> 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 8 <u>RMP (SR)</u> 11 Other (specify) _____ 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot 3 <u>Mill slot</u> 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 _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL:					
1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other _____ Grout Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ 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) <u>landfill</u> 13 Insecticide storage					
Direction from well? <u>W</u>					
How many feet? <u>Approx 75'</u>					
LITHOLOGIC LOG					
FROM	TO	LITHOLOGIC LOG			
0	14	Yellow Clay			
14	18	Red "			
18	19	Sand Stone			
19	24	Creek Gravel Flint			
24	27	Flint Rock			
27	45	Blue Shale			
Filled back to 38 1/2 ft.					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) <u>reconstructed</u> , or (3) <u>plugged</u> under my jurisdiction and was completed on (mo/day/year) <u>3-14-94</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>180</u> This Water Well Record was completed on (mo/day/yr) <u>3-22-94</u> under the business name of <u>Backhus Drilling</u> by (signature) <u>Paul H. Backhus</u>					