

1 LOCATION OF WATER WELL: County: Lyon	Fraction SE ¼ SE ¼ SE ¼	Section Number 9	Township Number T 19 S	Range Number R 11 E/W
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Distance and direction from nearest town or city street address of well if located within city?  
**804 W. 6th Ave., Emporia**

2 WATER WELL OWNER: KDHE  
 RR#, St. Address, Box #: 1000 SW Jackson St., Suite 420  
 City, State, ZIP Code: Topeka KS 66612  
 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: 30 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 NA ft. after . . . . . hours pumping . . . . . gpm Est. Yield NA gpm: Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm Bore Hole Diameter 11 in. to 30 ft., and . . . . . in. to . . . . . 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 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes.....No✓; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes No ✓

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued . . . . . Clamped . . . . .
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
2 PVC	4 ABS	7 Fiberglass	Welded . . . . .
Blank casing diameter . . . . . 4 in. to . . . . . 26.5 ft, Dia . . . . . in. to . . . . . ft, Dia . . . . . in. to . . . . . ft			Threaded. ✓
Casing height above land surface . . . . . 0 in., weight . . . . . lbs./ft. Wall thickness or gauge No. . . . . Sch. 40			
TYPE OF SCREEN OR PERFORATION MATERIAL	7 PVC	10 Asbestos-cement	
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS
SCREEN OR PERFORATION OPENINGS ARE:	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
1 Continuous slot	3 Mill slot	6 Wire wrapped	9 Drilled holes
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify) . . . . .
SCREEN-PERFORATED INTERVALS: From . . . . . 26.5 ft. to . . . . . 30 ft., From . . . . . ft. to . . . . . ft.			
GRAVEL PACK INTERVALS: From . . . . . 25 ft. to . . . . . 30 ft., From . . . . . ft. to . . . . . ft.			

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other Concrete
Grout Intervals: From . . . . . 0 ft. to . . . . . 2 ft., From . . . . . 2 ft. to . . . . . 25 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
	2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage
	3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage
				13 Insecticide storage
Direction from well?	How many feet?			

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Gravel, compacted,			
1	10	Clay, backfilled,			
10	30	Sand, f-c, backfilled,			

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) . . . . . 11/23/2010 . . . . . and this record is true to the best of my knowledge and belief.  
 Kansas Water Well Contractor's License No. . . . . 527 . . . . . This Water Well Record was completed on (mo/day/yr) . . . . . 12/22/2010  
 under the business name of **GeoCore, Inc.** by (signature) *Dale Holt*

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.