

| | | | | |
|--|---|--------------------------------|---------------------------------|-------------------------------|
| 1 LOCATION OF WATER WELL: County: Washington | Fraction NE 1/4 NE 1/4 NW 1/4 | Section Number 14.26 | Township Number T 1 S | Range Number R 3 EW |
|--|---|--------------------------------|---------------------------------|-------------------------------|

Distance and direction from nearest town or city street address of well if located within city?
8 1/2 North ~~1/2~~ West Of Washington

2 WATER WELL OWNER: **Washington Veterinary Clinic**
 RR#, St. Address, Box # : **312 N B St.** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : **Washington, KS. 66968** Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF COMPLETED WELL: **48.100** ft. ELEVATION:

Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL ... **45** ... ft. below land surface measured on mo/day/yr ... **6/2/98**

Pump test data: Well water was ... ft. after ... hours pumping ... gpm

Est. Yield ... **30** ... gpm: Well water was ... ft. after ... hours pumping ... gpm

Bore Hole Diameter ... **10** ... in. to ... **102** ... 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 |
| 2 Irrigation | 4 Industrial | 7 Lawn and garden only |
| | | 10 Monitoring well |

12 Other (Specify below) **Hog Building**

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:

| | | | | |
|---------|------------|-------------------|-------------------------|--------------------------------|
| 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 |

Blank casing diameter ... **5** ... in. to ... **56** ... ft., Dia. in. to ft., Dia. in. to ft.

Casing height above land surface ... **18** ... in., weight ... **200** ... lbs./ft. Wall thickness or gauge No. **265**

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 | 11 Other (specify) |
| | | | | 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 ... **56** ... ft. to ... **96** ... ft., From ... ft. to ... ft.

GRAVEL PACK INTERVALS: From ... **30** ... ft. to ... **100** ... ft., From ... ft. to ... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Intervals: From ... **5** ... ft. to ... **30** ... 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) |
| | | | 13 Insecticide storage | |

Direction from well? **NW** How many feet? **300**

| FROM | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|------|-----|------------------|------|----|--------------------|
| 0 | 2 | Topsoil | | | |
| 2 | 9 | Tan Clay | | | |
| 9 | 16 | Brown Clay | | | |
| 16 | 38 | Red & White Clay | | | |
| 38 | 46 | Gray Clay | | | |
| 46 | 69 | Sandstone Layers | | | |
| 69 | 74 | Gray Clay | | | |
| 74 | 81 | Sandstone | | | |
| 81 | 92 | Red & White Clay | | | |
| 92 | 94 | Limestone | | | |
| 94 | 102 | 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) ... **6/2/98** ... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ... **518** ... This Water Well Record was completed on (mo/day/yr) ... **6/6/98** ... under the business name of **Blue Valley Drilling** by (signature) *Em ...*

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