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|--|--|----------------------|--|----------------|---|-----------------|--|--------------|--|
| 1 LOCATION OF WATER WELL: | | Fraction | | Section Number | | Township Number | | Range Number | |
| County: Allen | | SE 1/4 SE 1/4 SE 1/4 | | 27 | | T 29 S | | R 18 E/W | |
| Distance and direction from nearest town or city street address of well if located within city? | | | | | | | | | |
| 340 feet Northeast of the SE corner of Davis St. & Hwy 54 | | | | | | | | | |
| 2 WATER WELL OWNER: Hampel Oil Distributor, Inc. | | | | | Board of Agriculture, Division of Water Resources | | | | |
| RR#, St. Address, Box # : 503 West St. | | | | | Application Number: | | | | |
| City, State, ZIP Code : Iola, Kansas 66749 | | | | | | | | | |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | | | | | 4 DEPTH OF COMPLETED WELL: 15 ft. ELEVATION: | | | | |
| | | | | | Depth(s) Groundwater Encountered 1. 12 ft. 2. ft. 3. ft. | | | | |
| | | | | | WELL'S STATIC WATER LEVEL 8.48 ft. below land surface measured on mo/day/yr | | | | |
| | | | | | 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: 7.5/8 in. to 15 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 X; If yes, mo/day/yr sample was submitted | | | | |
| | | | | | Water Well Disinfected? Yes No X | | | | |
| 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 | | | | | | | | | |
| Blank casing diameter 2 in. to 5 ft. Dia in. to ft. Dia in. to ft. | | | | | | | | | |
| Casing height above land surface 0 in. weight lbs./ft. Wall thickness or gauge No. sch. 40 | | | | | | | | | |
| 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) | | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | |
| 1 Continuous slot 2 Mill slot 3 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 15 ft. From ft. to ft. | | | | | | | | | |
| GRAVEL PACK INTERVALS: From 3 ft. to 15 ft. From ft. to ft. | | | | | | | | | |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other | | | | | | | | | |
| Grout Intervals: From 0 ft. to 2 ft. From 2 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) | | | | | | | | | |
| 13 Insecticide storage | | | | | | | | | |
| Direction from well? South How many feet? 350 | | | | | | | | | |
| FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS | | | | | | | | | |
| 0 1 Grvl & Snd, f-c grnd, prly srted, subrnd-ang, sl lt brn cly | | | | | | | | | |
| 1 3 Cly, v drk brn, v slty, mod snd, f-c grnd sl grvl | | | | | | | | | |
| 3 5 Cly, v drk, mod plstc, mod slty, damp | | | | | | | | | |
| 5 9 Cly, lt olv - gry brn, v slty, mod - v plstc damp | | | | | | | | | |
| 9 11 Cly, lt - med gry, v slty, v plstc, damp moist | | | | | | | | | |
| 11 15 Cly, lt oran - brn, v slty, v plstc | | | | | | | | | |
| MW11 - Flushmount | | | | | | | | | |
| Don Taylor | | | | | | | | | |
| 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) 10-21-94 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) 10-24-94 | | | | | | | | | |
| under the business name of GeoCore Services, Inc. by (signature) | | | | | | | | | |