

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Wilson</u>		<u>SW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$	<u>17</u>	<u>T</u> <u>27</u> <u>S</u>	<u>R</u> <u>14</u> <u>E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>.5 Miles north & .5 miles west of Coyville</u>					
2 WATER WELL OWNER:		Well No. 1 (TH 1--84)		Board of Agriculture, Division of Water Resources	
RR#, St. Address, Box # :		<u>Coyville</u>		Application Number:	
City, State, ZIP Code :		<u>Kansas 66727</u>			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>290</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>26</u> ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL <u>20</u> ft. below land surface measured on mo/day/yr <u>10/23/84</u>			
		Pump test data: Well water was ft. after hours pumping gpm			
		Est. Yield <u>10-15</u> gpm: Well water was ft. after hours pumping gpm			
		Bore Hole Diameter <u>7 7/8</u> in. to <u>52</u> ft. and <u>4 3/4</u> in. to <u>290</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 Observation well			
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 <u>X</u> 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 <u>.5</u> in. to <u>50</u> ft., Dia. in. to ft., Dia. in. to ft.					
Casing height above land surface <u>18</u> in., weight <u>SDR 26</u> lbs./ft. Wall thickness or gauge No. <u>.0214</u> "					
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)
				9 ABS	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 ft. to ft., From ft. to ft.					
GRAVEL PACK INTERVALS: From <u>None</u> ft. to ft., From ft. to ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grout Intervals: From <u>0</u> ft. to <u>10</u> 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? <u>SE</u>		How many feet? <u>600</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	10	Fill dirt	271	274	20 Limestone
10	26	Brn red clay	274	290	9 Blue shale
26	30	Gray clay w/sandstreaks			
30	65	Blue shale/clay			
65	70	Blue shale/clay			
70	71	Limestone			
71	90	Shale/clay sandstone			
90	112	Shale and clay			
112	116	Sandstone			
116	233	Shale / clay			
233	244	Limestone			
244	261	Blue shale			
261	263	Limestone			
263	271	Blue 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>Oct. 26, 1984</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>102</u> This Water Well Record was completed on (mo/day/yr) <u>Feb. 7, 1985</u> under the business name of <u>Layne-Western Company, Inc.</u> by (signature) <u>Robert L. Vincent</u>					
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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

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