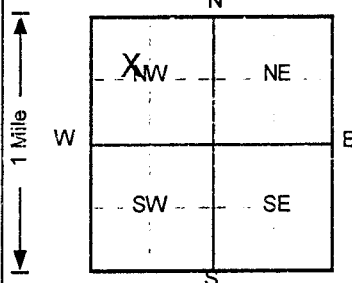


1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: <b>Brown</b>		<b>SE ¼ NW ¼ NW ¼</b>		<b>34</b>		<b>T 2 S</b>		<b>R 15 EW</b>	
Distance and direction from nearest town or city street address of well if located within city? <b>50' N &amp; 50' E of Old USDA grain bins, Fairview</b>									
2 WATER WELL OWNER: <b>KDHE-BER</b>									
RR#, St. Address, Box # : <b>Building 740, Forbes Field</b>					Board of Agriculture, Division of Water Resources				
City, State, ZIP Code : <b>Topeka, Kansas 66620</b>					Application Number:				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF COMPLETED WELL ..... <b>81</b> ..... ft ELEVATION: ..... <b>1220.1</b> .....						
			Depth(s) Groundwater Encountered 1. .... ft 2. .... ft 3. .... ft						
			WELL'S STATIC WATER LEVEL ... <b>30.67</b> ... ft below land surface measured on mo/day/yr ..... <b>7/6/95</b> .....						
			Pump test data: Well water was ... <b>NA</b> ... ft after ..... hours pumping ..... gpm						
			Est. Yield ... <b>NA</b> ... gpm: Well water was ..... ft after ..... hours pumping ..... gpm						
			Bore Hole Diameter ... <b>8</b> ... in. to ... <b>84</b> ... 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 <b>10</b> Monitoring well									
Was a chemical/bacteriological sample submitted to Department? Yes.....No <input checked="" type="checkbox"/> .....; If yes, mo/day/yr sample was submitted									
Water Well Disinfected? Yes No <input checked="" type="checkbox"/>									
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ..... Clamped .....									
<b>2</b> PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded .....									
Blank casing diameter ..... <b>4</b> ..... in. to ..... <b>56</b> ..... ft, Dia ..... in. to ..... ft, Dia ..... in. to ..... ft									
Casing height above land surface ..... <b>-5</b> ..... in., weight ..... lbs./ft. Wall thickness or gauge No. .... <b>Sch..40</b> .....									
TYPE OF SCREEN OR PERFORATION MATERIAL									
<b>7</b> PVC 10 Asbestos-cement									
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) .....									
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:									
5 Gauzed wrapped 8 Saw cut 11 None (open hole)									
1 Continuous slot <b>3</b> Mill slot 6 Wire wrapped 9 Drilled holes									
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) .....									
SCREEN-PERFORATED INTERVALS: From ..... <b>56</b> ..... ft to ..... <b>81</b> ..... ft, From ..... ft to ..... ft									
From ..... ft to ..... ft, From ..... ft to ..... ft									
GRAVEL PACK INTERVALS: From ..... <b>52</b> ..... ft to ..... <b>84</b> ..... ft, From ..... ft to ..... ft									
From ..... ft to ..... ft, From ..... ft to ..... ft									
6 GROUT MATERIAL: 1 Neat cement <b>2</b> Cement grout <b>3</b> Bentonite 4 Other .....									
Grout Intervals: From ..... <b>0</b> ..... ft to ..... <b>7</b> ..... ft, From ..... <b>7</b> ..... ft to ..... <b>52</b> ..... 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 <b>12</b> Fertilizer storage 15 Oil well/Gas well									
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below)									
Direction from well? <b>SE</b> How many feet? <b>100</b>									
LITHOLOGIC LOG									
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS			
0	2	Clay, Dark Brown		62	67.5	Shale, Very Dark Gray to Black			
2	4	Clay, Red Brown		67.5	69.5	Limestone, Light Brown Gray			
4	8	Shale, Tan to Yellow		69.5	77	Shale, Light Gray Brown			
8	13	Limestone, Yellow Brown		77	81	Limestone, Gray Brown			
13	16	Shale, Light Yellow Brown		81	84	Shale, Gray			
16	22	Shale, Green							
22	23	Limestone, Light Gray							
22.5	32	Shale, Green							
32	38	Shale, Green							
38	46	Shale, Red to Maroon							
45	51	Shale, Red Brown							
51	53	Shale, Gray Green							
53	59.5	Limestone, Brown to Gray Brown				MW111, Tag # 00117274, Flushmount			
59.5	60.5	Shale, Very Dark Gray				Project Name: Fairview			
60.5	62	Limestone, Brown to Yellow Brown				GeoCore # 11, # 133102			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <b>1</b> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) ..... <b>8/31/95</b> ..... and this record is true to the best of my knowledge and belief.									
Kansas Water Well Contractor's License No. .... <b>527</b> ..... This Water Well Record was completed on (mo/day/yr) ..... <b>9/1/95</b> .....									
under the business name of <b>GeoCore Services, Inc.</b> by (signature) <i>Dale Riff</i>									
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.									