

1 LOCATION OF WATER WELL:		Fraction		Section Number	Township Number		Range Number	
County: <b>Brown</b>		SE 1/4 NW 1/4 NW 1/4		34	T 2 S		R 15 <b>E/W</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>23.5</b> ft ELEVATION: <b>1220.36</b>					
			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 <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>23.5</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 <b>✓</b> .....; If yes, mo/day/yr sample was submitted			Water Well Disinfected? Yes No <b>✓</b>					
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>2</b> in. to <b>8.5</b> ft, Dia ..... in. to ..... ft, Dia ..... in. to ..... ft			7 Fiberglass			Threaded. <b>✓</b>		
Casing height above land surface <b>7</b> in., weight ..... lbs./ft. Wall thickness or gauge No. <b>Sch. 40</b>								
TYPE OF SCREEN OR PERFORATION MATERIAL								
1 Steel 3 Stainless steel 5 Fiberglass <b>7</b> PVC			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 <b>3</b> 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 <b>8.5</b> ft to <b>23.5</b> ft, From ..... ft to ..... ft								
From ..... ft to ..... ft, From ..... ft to ..... ft								
GRAVEL PACK INTERVALS: From <b>7</b> ft to <b>23.5</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>3</b> ft, From <b>3</b> ft to <b>7</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			11 Fuel storage 15 Oil well/Gas well					
3 Watertight sewer lines 6 Seepage pit 9 Feedyard			<b>16</b> Other (specify below) <b>Grain Storage</b>					
Direction from well? <b>SE</b>			How many feet? <b>100</b>					
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS								
0 2 Clay, Dark Brown								
2 4 Clay, Red Brown								
4 7 Shale, Tan to Yellow								
7 13 Limestone, Yellow Brown								
13 16 Shale, Light Yellow Brown								
16 21.5 Shale, Green								
21.5 22.5 Limestone, Light Gray								
22.5 23.5 Shale, Medium to Light Green								
MW11S, Tag # 00117151, Flushmount								
Project Name: Fairview								
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 Ruff</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.								

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