

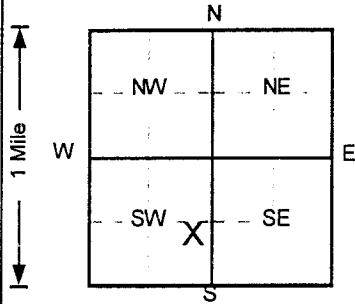
1 LOCATION OF WATER WELL: Fraction **NE ¼ SE ¼ SW ¼** Section Number **27** Township Number **T 2 S** Range Number **R 15 E/W**  
 County: **Brown**

Distance and direction from nearest town or city street address of well if located within city?

**North of low income housing, Fairview**

2 WATER WELL OWNER: **KDHE-BER**  
 RR#, St Address, Box # : **Building 740, Forbes Field** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : **Topeka, Kansas 66620** Application Number:

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



4 DEPTH OF COMPLETED WELL: **99** ft ELEVATION: **1223.81**  
 Depth(s) Groundwater Encountered 1. .... ft 2. .... ft 3. .... ft  
 WELL'S STATIC WATER LEVEL: **41.59** ft below land surface measured on **mo/day/yr** **7/6/95**  
 Pump test data: Well water was **NA** ft after ..... hours pumping ..... gpm  
 Est. Yield **NA** gpm: Well water was ..... ft after ..... hours pumping ..... gpm  
 Bore Hole Diameter **8** 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 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 ; 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 **4** in. to **69** ft, Dia ..... in. to ..... ft, Dia ..... in. to ..... ft  
 Casing height above land surface **3** 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) .....  
 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 **69** ft to **99** ft, From ..... ft to ..... ft  
 From ..... ft to ..... ft, From ..... ft to ..... ft  
 GRAVEL PACK INTERVALS: From **67** ft to **102** ft, From ..... ft to ..... ft  
 From ..... ft to ..... ft, From ..... ft to ..... ft

6 GROUT MATERIAL: 1 Neat cement **2** Cement grout **3** Bentonite 4 Other .....  
 Grout Intervals: From **0** ft to **31** ft, From **31** ft to **67** 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)  
**Grain Storage** .....  
 Direction from well? **SW** How many feet? **1300**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Clay, Dark Brown	82	87	Shale, Very Dark Brown to Black
2	4	Clay, Brown	87	89	Limestone, Gray to Brown Gray
4	15	Clay, Red Brown	89	93	Shale, Gray
15	17	Shale, Green to Light Gray	93	96	Shale, Yellow Brown
17	21	Limestone, Brown	96	99	Limestone, Tan to Yellow Brown
21	24	Shale, Light Gray	99	102	Shale, Gray
24	31	Shale, Light Gray			
31	36	Shale, Light Gray Brown			
36	49	Shale, Green to Gray Green			
49	51	Shale, Gray			
51	53	Shale, Green to Gray Green			
53	66	Shale, Red to Maroon			
66	72	Shale, Red Brown			MW14I, Tag # 00117298, Above Ground
72	78	Limestone, Gray to Gray Brown			Project Name: Fairview
78	82	Shale, Gray			GeoCore # 11, # 133102

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) **8/31/95** 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) **9/1/95**  
 under the business name of **GeoCore Services, Inc.** by (signature) *Paul R...*

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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