

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <b>Sumner</b>	<b>SE ¼ SE ¼ SE ¼</b>	<b>11</b>	T <b>32</b> S	R <b>2</b> E

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

**Approx. 10' S, 22' W of SWC of Myrtle St. and Sumner Ave. - Oxford**

2 WATER WELL OWNER: <b>KDHE</b>	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #: <b>1000 SW Jackson St., Ste. 410</b>	Application Number:
City, State, ZIP Code: <b>Topeka, KS 66612</b>	

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL <b>45</b> ft. ELEVATION: <b>1189.02 (TOC)</b>
	Depth(s) Groundwater Encountered 1 <b>39</b> ft. 2 _____ ft. 3 _____ ft.
	WELL'S STATIC WATER LEVEL <b>38.03</b> ft. below TOC measured on mo/day/yr <b>03/06/15</b>
	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 <b>8.25</b> in. to <b>45</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 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) <b>10 Monitoring well</b>	
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b> If yes, mo/day/yr sample was submitted _____	
Water Well Disinfected? Yes _____ No <b>X</b>	

5 TYPE OF BLANK CASING USED:	5 Wrought Iron 8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
1 Steel 3 RMP (SR)	6 Asbestos-Cement 9 Other (specify below)	Welded _____
<b>2 PVC</b> 4 ABS	7 Fiberglass	<b>Threaded Flush</b>
Blank casing diameter <b>2</b> in. to <b>30</b> ft. Dia	in. to _____ ft. Dia	in. to _____ ft. Dia
Casing height above land surface <b>0</b> in., weight <b>0.703</b> lbs./ft.	Wall thickness or gauge No. <b>SCH. 40</b>	
TYPE OF SCREEN OR PERFORATION MATERIAL:		
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)	<b>7 PVC</b> 10 Asbestos-cement	
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)		
SCREEN OR PERFORATION OPENINGS ARE:		
1 Continuous slot <b>3 Mill slot</b> 5 Gauzed wrapped 8 Saw cut 11 None (open hole)	6 Wire wrapped 9 Drilled holes	10 Other (specify) _____
2 Louvered shutter 4 Key punched 7 Torch cut		
SCREEN-PERFORATED INTERVALS: From <b>30</b> ft. to <b>45</b> ft. From _____ ft. to _____ ft.		
GRAVEL PACK INTERVALS: From <b>28</b> ft. to <b>45</b> ft. From _____ ft. to _____ ft.		

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <b>3 Bentonite</b> 4 Other _____	Grout Intervals From <b>3</b> ft. to <b>28</b> ft. From _____ ft. to _____ ft.
What is the nearest source of possible contamination:	
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/ Gas well	10 Livestock pens 14 Abandoned water well
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)	
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage	
Direction from well? _____ How many feet? _____	

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2		<b>Topsoil, sandy clay, dark brown</b>			
2	19		<b>Silty Clay, dark brown to red brown, some fine sand</b>			
19	23		<b>Sandy Clay, brown</b>			
23	23.5		<b>Sand</b>			
23.5	38		<b>Sandy Clay</b>			
38	43		<b>Sand</b>			
43	45		<b>Shale</b>			
<b>Survey date: 04/02/15; Datum: NAD83</b>						
<b>Latitude: N 37.27526</b>						
<b>Longitude: W 97.16930</b>						

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <b>(1) constructed</b> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/yr) <b>03/04/15</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>531</b> This Water Well Record was completed on (mo/day/yr) <b>04/17/15</b> under the business name of <b>GSI Engineering, LLC</b> by (signature) <i>[Signature]</i>
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INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

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