

1) LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Cowley</u>		<u>SW ¼ NW ¼ NW ¼</u>	<u>19</u>	<u>T 34 S</u>	<u>R 4 E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1705 N. Summit; 37'E, 42'S of SE corner of Ramsey's Auto Parts</u>					
2) WATER WELL OWNER: <u>Coastal Mart, Inc.</u>					
RR#, St. Address, Box #: <u>110 S. Main, Suite 500</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code: <u>Wichita, KS 67202</u>			Application Number:		
3) LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4) DEPTH OF COMPLETED WELL: <u>15.5</u> ft. ELEVATION: <u>1085.22 TOC</u>			
		Depth(s) Groundwater Encountered _____ ft. _____ ft. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>9.79</u> ft. below land surface measured on mo/day/yr <u>2/12/98</u>			
		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: <u>8</u> in. to <u>15.5</u> 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 <u>Monitoring well</u>			
		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 _____ No <u>X</u>			
5) TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		5 Wrought iron	
<u>2 PVC</u>		4 ABS		6 Asbestos-Cement	
				7 Fiberglass	
Blank casing diameter <u>2</u> in. to <u>5.5</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.				CASING JOINTS: Glued _____ Clamped _____	
Casing height above land surface <u>flush</u> in., weight <u>0.703</u> lbs./ft. Wall thickness or gauge No. <u>Sch 40</u>				Welded _____ Threaded <u>flush</u>	
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		6 Concrete tile	
				7 Torch cut	
SCREEN OR PERFORATION OPENINGS ARE:		1 Continuous slot		2 Mill slot <u>2</u>	
2 Louvered shutter		4 Key punched		5 Gauzed wrapped	
				6 Wire wrapped	
SCREEN-PERFORATED INTERVALS: From <u>5.5</u> ft. to <u>15.5</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.				8 Saw cut	
				9 Drilled holes	
GRAVEL PACK INTERVALS: From <u>4</u> ft. to <u>15.5</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.				10 Other (specify) _____	
				11 None used (open hole)	
				12 None used (open hole)	
6) GROUT MATERIAL:					
1 Neat cement		2 Cement grout		<u>3 Bentonite</u>	
4 Other _____					
Grout Intervals: From <u>1</u> ft. to <u>4</u> ft., From _____ ft. to _____ 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	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
				10 Livestock pens	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/Gas well	
				16 Other (specify below) _____	
Direction from well?				How many feet?	
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>1</u>	<u>Topsoil/Fill</u>			
<u>1</u>	<u>6</u>	<u>Clay, m-h plasticity</u>			
<u>6</u>	<u>15.5</u>	<u>Sandy clay, i-mplasticity</u>			
7) CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>3/4/98</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>531</u> This Water Well Record was completed on (mo/day/yr) <u>3/25/98</u> under the business name of <u>GSI</u> by (signature) <u>Candace Watson</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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.