

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Cowley		SE ¼ NW ¼ SW ¼	32	T 34 S	R 4 E/V
Distance and direction from nearest town or city street address of well if located within city? 1400 So. M St., Arkansas City					
2 WATER WELL OWNER: MRP Properties Company, LLC		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # : 1400 South M Street		Application Number:			
City, State, ZIP Code : Arkansas City, KS 67005					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 30 ft. ELEVATION: 1061.22			
		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 NA ft. after hours pumping gpm			
		Est. Yield NA gpm: Well water was ft. after hours pumping gpm			
		Bore Hole Diameter 8 in. to 31 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 <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
2 PVC		4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded
			7 Fiberglass		Threaded. <input checked="" type="checkbox"/>
Blank casing diameter 2 in. to 20 ft., Dia in. to ft., Dia in. to ft.					
Casing height above land surface 27.36 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 20 ft. to 30 ft., From ft. to ft.					
From ft. to ft., From ft. to ft.					
GRAVEL PACK INTERVALS: From 18 ft. to 31 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 Concrete					
Grout Intervals: From 0 ft. to 3 ft., From 3 ft. to 18 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)
				13 Insecticide storage	
Direction from well? How many feet?					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Silt, sandy, w/Gravel, Dark Gray Brown	29.75	30	Sand, silty, Dark Brown
1	4	Sand, silty, Dark Gray Brown			
4	4.5	Sand, silty, Black Brown			
4.5	5	Clay, Dark Brown-Black			
7	8.25	Clay, Dark Brown			
8.25	8.5	Silt, sandy, Gray Brown			
8.5	9.5	Clay, Brown			
9.5	14.5	Sand, f, Tan			
14.5	17.75	Sand, m-c, Lt. Brown			
17.75	18.25	Sand, f-m, Gray			
18.25	23.5	Sand, m-c, w/cobbles, Gray			
23.5	24.75	Sand, m, Gray			
24.75	25	Clay, Olive			MW-36C, Abovegrade
25	28.75	Clay, sandy,			
28.75	29.75	Clay, Olive			
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) 10/11/2013 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) 11/9/13					
under the business name of GeoCore, Inc. by (signature) <i>Sarah [unclear]</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.					

OFFICE USE ONLY

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