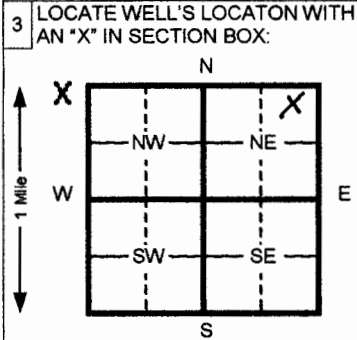


1 LOCATION OF WATER WELL: Fraction Section Number Township Number Range Number  
 County: **Brown** Ne ¼ Ne ¼ Ne ¼ **30** T **4** S R **18** E  
 Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: **United States Department of Agriculture**  
 RR#, St. Address, Box #: **Stop 0513, Room 4717-S, 1400 Independence Ave, SW** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: **Washington, DC 20250-0513** Application Number:



4 DEPTH OF COMPLETED WELL **66** ft. ELEVATION: **1151.81'**  
 Depth(s) Groundwater Encountered 1 **58** ft. 2 \_\_\_\_\_ ft. 3 \_\_\_\_\_ ft.  
 WELL'S STATIC WATER LEVEL **56.61** ft. below land surface measured on mo/day/yr **11/13/03**  
 Pump test data: Well water was **None** ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Est. Yield \_\_\_\_\_ gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Bore Hole Diameter **5.25** in. to **21** ft. and **3.25** in. to **Pilot Hole 66** 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)  Monitoring well **Sand Point 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: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued \_\_\_\_\_ Clamped \_\_\_\_\_  
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded \_\_\_\_\_  
 PVC 4 ABS 7 Fiberglass Threaded   
 Blank casing diameter **1** in. to **51** ft. Dia **None** in. to \_\_\_\_\_ ft. Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface **Flush Mount** in., weight **Schedule 40** lbs./ft. Wall thickness or gauge No. **.133"**  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  PVC 10 Asbestos-cement  
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) \_\_\_\_\_  
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)  
 SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)  
 1 Continuous slot  Mill slot 6 Wire wrapped 9 Drilled holes  
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) \_\_\_\_\_  
 SCREEN-PERFORATED INTERVALS: From **51** ft. to **66** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 GRAVEL PACK INTERVALS: From **49** ft. to **66** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout  Bentonite 4 Other \_\_\_\_\_  
 Grout Intervals From **0** ft. to **49** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 What is the nearest source of possible contamination:  Livestock pens 14 Abandoned water well  
 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/ Gas 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? **NW** How many feet? **300'**

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<b>0</b>	<b>3'</b>		<b>Top Soil</b>			
<b>3'</b>	<b>50'</b>		<b>Clay and Silt</b>			
<b>50'</b>	<b>66'</b>		<b>Sand and Clay</b>			

**RECEIVED**  
**NOV 08 2004**  
**BUREAU OF WATER**

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/yr) **11/13/03** and this record is true to the best of my knowledge and belief. Kansas  
 Water Well Contractor's License No. **680** This Water Well Record was completed on (mo/day/yr) **04/30/04**  
 under the business name of **Delta Environmental Services** by (signature) \_\_\_\_\_

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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