

1 LOCATION OF WATER WELL: County: <u>WASHINGTON</u>		Fraction <u>SE</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$		Section Number <u>5</u>	Township Number <u>4</u> <u>S</u>	Range Number <u>4</u> <u>E</u> <u>W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1/2 mile west of Greenleaf</u>						
2 WATER WELL OWNER: RR#, St. Address, Box # City, State, ZIP Code		<u>City of Greenleaf</u> <u>Greenleaf, KS 66943</u>		WELL #7 Board of Agriculture, Division of Water Resources Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>74</u> ft. ELEVATION: <u>5-29-91</u>				
1 Mile		Depth(s) Groundwater Encountered <u>1</u> ft. <u>2</u> ft. <u>3</u> ft.				
		WELL'S STATIC WATER LEVEL <u>26'</u> ft. below land surface measured on mo/day/yr				
		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 _____ in. to _____ ft., and _____ in. to _____ ft.				
		WELL WATER TO BE USED AS: <u>5 Public water supply</u> <u>8 Air conditioning</u> <u>11 Injection well</u>				
		<u>1 Domestic</u> <u>3 Feedlot</u> <u>6 Oil field water supply</u> <u>9 Dewatering</u> <u>12 Other (Specify below)</u>				
		<u>2 Irrigation</u> <u>4 Industrial</u> <u>7 Lawn and garden only</u> <u>10 Monitoring well</u>				
		Was a chemical/bacteriological sample submitted to Department? Yes <u>X</u> No _____; If yes, mo/day/yr sample was sub- mitted _____ Water Well Disinfected? Yes <u>X</u> No _____				
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued _____ Clamped _____				
<u>1 Steel</u> <u>3 RMP (SR)</u> <u>6 Asbestos-Cement</u> <u>9 Other (specify below)</u> <u>Welded</u>		<u>7 Fiberglass</u> _____ <u>Threaded</u> _____				
Blank casing diameter <u>12</u> in. to <u>74</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		Casing height above land surface <u>18</u> in., weight <u>49</u> lbs./ft. Wall thickness or gauge No. <u>375</u>				
TYPE OF SCREEN OR PERFORATION MATERIAL:		<u>7 PVC</u> <u>10 Asbestos-cement</u>				
<u>1 Steel</u> <u>3 Stainless steel</u> <u>5 Fiberglass</u> <u>8 RMP (SR)</u> <u>11 Other (specify)</u> <u>Johnson</u>		<u>2 Brass</u> <u>4 Galvanized steel</u> <u>6 Concrete tile</u> <u>9 ABS</u> <u>12 None used (open hole)</u>				
SCREEN OR PERFORATION OPENINGS ARE:		<u>5 Gauzed wrapped</u> <u>8 Saw cut</u> <u>11 None (open hole)</u>				
<u>1 Continuous slot</u> <u>3 Mill slot</u> <u>6 Wire wrapped</u> <u>9 Drilled holes</u>		<u>2 Louvered shutter</u> <u>4 Key punched</u> <u>7 Torch cut</u> <u>10 Other (specify)</u> <u>.060 slott</u>				
SCREEN-PERFORATED INTERVALS:		From <u>41.5</u> ft. to <u>55.5</u> ft., From _____ ft. to _____ ft.				
		From <u>68</u> ft. to <u>74</u> ft., From _____ ft. to _____ ft.				
GRAVEL PACK INTERVALS:		From <u>33</u> ft. to <u>58.5</u> ft., From <u>61.5</u> ft. to <u>74</u> ft.				
		From _____ ft. to _____ ft., From _____ ft. to _____ ft.				
6 GROUT MATERIAL: <u>1 Neat cement</u> <u>2 Cement grout</u> <u>3 Bentonite</u> <u>4 Other</u>		Grout Intervals: From <u>4</u> ft. to <u>24</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.				
What is the nearest source of possible contamination:		<u>10 Livestock pens</u> <u>14 Abandoned water well</u>				
<u>1 Septic tank</u> <u>4 Lateral lines</u> <u>7 Pit privy</u> <u>11 Fuel storage</u> <u>15 Oil well/Gas well</u>		<u>2 Sewer lines</u> <u>5 Cess pool</u> <u>8 Sewage lagoon</u> <u>12 Fertilizer storage</u> <u>16 Other (specify below)</u>				
<u>3 Watertight sewer lines</u> <u>6 Seepage pit</u> <u>9 Feedyard</u> <u>13 Insecticide storage</u>		How many feet? <u>150'</u>				
Direction from well? <u>south</u>						
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
0	2	Top Soil				
2	10	Brown Clay				
10	15	Grey Clay				
15	20	Brown Clay				
20	33	Grey Clay				
33	34	Fine Sand-Silty, Brown				
34	45	Fine Sand-Clean				
45	55	Fine Sand-Coarse Sand-Brown-Clean				
55	59	Brown Clay				
59	66	Blue Clay				
66	67	Fine Blue Silt				
67	74	Sandstone-loose				
74	76	Grey Shale				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) <u>reconstructed</u> , or (3) <u>plugged</u> under my jurisdiction and was completed on (mo/day/year) <u>5-31-91</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>182</u> This Water Well Record was completed on (mo/day/yr) <u>6-25-91</u> under the business name of <u>STRADER DRILLING CO., INC.</u> by (signature) <u>[Signature]</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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.						