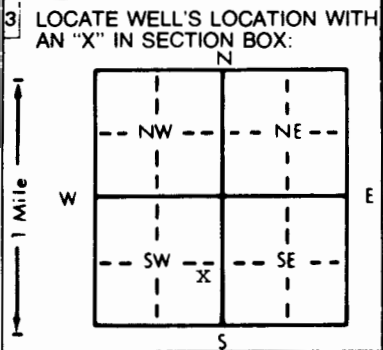


1 LOCATION OF WATER WELL: County: Marshall	Fraction NE 1/4 SE 1/4 SW 1/4	Section Number 20	Township Number T 4 S	Range Number R 7 E/W
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Distance and direction from nearest town or city street address of well if located within city?
On the downward side of the Blue river Levee

2 WATER WELL OWNER: **Department of the Army - Corps of Engineers**
Fort Riley Resident Office
 RR#, St. Address, Box # : **P.O. Box 2189**
 City, State, ZIP Code : **Fort Riley, KS 66442**
Board of Agriculture, Division of Water Resources
 Application Number:



4 DEPTH OF COMPLETED WELL: **36.79** ft. ELEVATION: **1110.25**

Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL **3** ft. below land surface measured on mo/day/yr

Pump test data: Well water was **not ch'd** ft. after hours pumping gpm

Est. Yield **unknown** gpm: Well water was ft. after hours pumping gpm

Bore Hole Diameter **24 1/2** in. to **10** ft., and **18** in. to **36.9** 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 **Relief Well**

Was a chemical/bacteriological sample submitted to Department? Yes..... No **X**..... If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes **X** 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 **X**
 2 PVC 4 ABS 7 Fiberglass **Stainless steel** Threaded.....

Blank casing diameter **8 5/8** in. to **22.29** ft. Dia in. to ft. Dia in. to ft.

Casing height above land surface **6** in. weight **28.55** lbs./ft. Wall thickness or gauge No. **.322**

TYPE OF SCREEN OR PERFORATION MATERIAL: 7 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 3 Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)

SCREEN-PERFORATED INTERVALS: From **22.29** ft. to **36.29** ft., From ft. to ft.
 From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From **8** ft. to **10** ft., From ft. to ft.
 From **10** ft. to **36.9** ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Intervals: From **1.5** ft. to **8** ft., From **0** ft. to **1.5** 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)
 None known

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	14	Clay			
14	24	Sand			
24	25	Clay			
25	27	Sand, fine			
27	36	Sand, medium			
36	36.9	Sand and big cobble			

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) **10-14-96** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **185**. This Water Well Record was completed on (mo/day/yr) **11-12-96** under the business name of **Clarke Well & Equipment, Inc.** by (signature) *Clarke Well & Equipment, Inc.*

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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