

1 LOCATION OF WATER WELL: County: Marshall	Fraction SW 1/4 SE 1/4 NE 1/4	Section Number 20	Township Number T 4 S	Range Number R 7 EW
--	---	-----------------------------	---------------------------------	-------------------------------

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: RR#, St. Address, Box # : City, State, ZIP Code :	Department of the Army - Corps of Engineers Fort Riley Resident Office P.O. Box 2189 Fort Riley, KS 66442	Board of Agriculture, Division of Water Resources Application Number: 1110.56
---	--	--

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL 27.4 ft. ELEVATION: 1110.56
--	---

Depth(s) Groundwater Encountered 1. **16** ft. 2. **10** ft. 3. **27** ft.

WELL'S STATIC WATER LEVEL **16** ft. below land surface measured on mo/day/yr

Pump test data: Well water was **not ch'd** ft. after **18** hours pumping **gpm**

Est. Yield **unknown** gpm: Well water was **unknown** ft. after **27** hours pumping **gpm**

Bore Hole Diameter **24 1/2** in. to **10** in. and **18** in. to **27** in.

WELL WATER TO BE USED AS:

1 Domestic	3 Feedlot	5 Public water supply	8 Air conditioning	11 Injection well
2 Irrigation	4 Industrial	6 Oil field water supply	9 Dewatering	12 Other (Specify below)
		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)
2 PVC	4 ABS	7 Fiberglass	Welded..... X
Blank casing diameter 8 5/8 in. to 25.9 ft. Dia			Threaded.....
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 <u>Stainless steel</u>	5 Fiberglass	8 RMP (SR)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS
SCREEN OR PERFORATION OPENINGS ARE:	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
1 <u>Continuous slot</u>	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 25.9 ft. to 26.9 ft.	From.....ft. to.....ft.	
GRAVEL PACK INTERVALS:	From 8 ft. to 10 ft.	From.....ft. to.....ft.	
	From 10 ft. to 27 ft.	From.....ft. to.....ft.	

6 GROUT MATERIAL:	1 <u>Neat cement</u>	2 <u>Cement grout</u>	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
	2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage
	3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage
				13 Insecticide storage
				14 Abandoned water well
				15 Oil well/Gas well
				16 Other (specify below)
				None known

Direction from well?		LITHOLOGIC LOG		PLUGGING INTERVALS	
FROM	TO	FROM	TO	FROM	TO
0	3				
3	7.5				
		Clay, silty			
		Gravel and sand, pieces of glass and trash			
7.5	10.5				
		Clay, silty			
10.5	10.7				
		Thin sand layer			
10.7	16				
		Clay, silty			
16	21				
		Sand and gravel, medium, coarse			
21	22.2				
		Clay			
22.2	24				
		Sand and gravel, medium, coarse			
24	24.4				
		Clay			
24.4	26.5				
		Sand and gravel, medium			
26.5	27				
		Bedrock			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 10-15-96 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) <i>Clarke W. Clarke</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.