

1 LOCATION OF WATER WELL:

County: POTTAWA

Distance and direction from nearest town or city street address of well if located within city? FROM HAVENSVILLE: 1/2 EAST AND 1/4 NORTH

Fraction

NR 1/4 SE 1/4 SW 1/4

Section Number

22

Township Number

T 6 S

Range Number

R 12 EW

Global Positioning Systems (decimal degrees, min. of 4 digits)

Latitude: 39° 30.645

Longitude: 96° 3.837

Elevation: _____

Datum: _____

Data Collection Method: _____

2 WATER WELL OWNER:

RON WATSLY

RR#, St. Address, Box # : 20950 SCHOLTY RD

City, State, ZIP Code : HAVENSVILLE, KS 66432

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N

--NW--

--NE--

--SW--

--SE--

X

S

E

4 DEPTH OF COMPLETED WELL ft.

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

WELL'S STATIC WATER LEVEL..... 34..... ft. below land surface measured on mo/day/yr 10/16/06

Pump test data: Well water was..... ft. after..... hours pumping..... gpm

Est. Yield..... 40..... gpm: Well water was..... ft. after..... hours pumping..... gpm

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well

Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)

2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring 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 CASING USED:

1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued X..... Clamped.....

2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded.....

7 Fiberglass Threaded.....

Blank casing diameter..... 5..... in. to..... 52..... ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft.

Casing height above land surface..... 24..... in., Weight..... lbs./ft. Wall thickness or gauge No. SDR 21

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel 3 Stainless Steel 5 Fiberglass 1 PVC 9 ABS 11 Other (Specify).....

2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)

2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify).....

SCREEN-PERFORATED INTERVALS: From..... 52..... ft. to..... 72..... ft., From..... ft. to..... ft.

GRAVEL PACK INTERVALS: From..... 25..... ft. to..... 72..... ft., From..... ft. to..... ft.

6 GROUT MATERIAL:

1 Neat cement 2 Cement grout 3 Bentonite 4 Other.....

Grout Intervals: From..... 3..... ft. to..... 25..... ft., From..... ft. to..... 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 13 Insecticide Storage 16 Other (specify below)

2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well

3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well

Direction from well? SOUTHWEST How many feet? 60

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	SOIL	40	46	SHALE, GRAY
1	8	LEASTONE	46	53	LEASTONE, H2O
8	11	SHALE, TAN	53	60	SHALE, DARK GRAY
11	13	LEASTONE	60	68	LEASTONE
13	16	SHALE, GRAY	68	80	SHALE, GRAY
16	17	LEASTONE			
17	23	SHALE, GRAY			
23	25	LEASTONE, HARDER			
25	38	SHALE, GRAY			
38	40	LEASTONE			

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) 10/17/06 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. 760 This Water Well Record was completed on (mo/day/year) 10/22/06

under the business name of ASSOCIATED DRILLING INC by (signature) [Signature]

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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdhe.state.ks.us/geo/waterwells>.