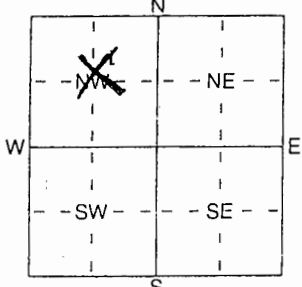


1 LOCATION OF WATER WELL: Fraction $\frac{1}{4}$ $\frac{1}{4}$ **NW** $\frac{1}{4}$ Section Number **31** Township Number **T 9 S R 11 E** Range Number **11**
 County: **Pottawatomie**
 Distance and direction from nearest town or city street address of well if located within city? **1 mile NW of Wamego** **Former Forbes Missile Base**
16795 Jay Rd, Wamego, KS 66547

2 WATER WELL OWNER: **US Army Corps of Engineers**
 RR#, St. Address, Box # : **601 East 12th St.** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : **Kansas City, MO 64106** Application Number:

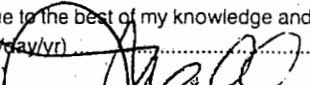
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  4 DEPTH OF COMPLETED WELL **118** ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1 **100** ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr _____
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 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 Domestic (lawn & garden) 10 Monitoring well **ISCO**
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X**; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes _____ No

5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
2 PVC 4 ABS 7 Fiberglass 9 Other (specify below) Welded _____
 Blank casing diameter **4"** in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface **30"** in., weight _____ lbs./ft. Wall thickness or gauge No. _____
 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) _____ ft.
 SCREEN-PERFORATED INTERVALS: From **9.8** ft. to **11.8** ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **9.5** ft. to **11.8** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 **Neat cement** 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From **0** ft. to **8.9** 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)
 13 Insecticide storage
 Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	118	Sand & Clay Layered			

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) **8/11/10** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No **597**. This Water Well Record was completed on (mo/day/yr) _____ under the business name of **Bart Longyear** by (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.