

1 LOCATION OF WATER WELL: County: <u>Leavenworth</u>	Fraction <u>South 1/4 SW 1/4 NW 1/4</u>	Section Number <u>18</u>	Township Number <u>T 9 S</u>	Range Number <u>R 23 EW</u>
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Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: Select Products
 RR#, St. Address, Box # : _____
 City, State, ZIP Code : Leavenworth, Kansas
 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... 14.8 ft. ELEVATION: ... 837.5

Depth(s) Groundwater Encountered 1. ... 15.0 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

Bore Hole Diameter ... 8 in. to ... 14.8 ft., and ... in. to ... 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
2 Irrigation	4 Industrial	7 Lawn and garden only
		<u>10 Observation well</u>

12 Other (Specify below) _____

Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes _____ No _____

5 TYPE OF BLANK CASING USED:

<u>1 Steel</u>	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below) _____	Welded _____
		7 Fiberglass		<u>Threaded</u>

Blank casing diameter ... 4 in. to ... 14.8 ft., Dia ... in. to ... ft., Dia ... in. to ... ft.

Casing height above land surface ... 24 in., weight ... lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	<u>3 Stainless steel</u>	5 Fiberglass	7 PVC	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	8 RMP (SR)	11 Other (specify) _____
			9 ABS	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

<u>1 Continuous slot</u>	3 Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify) _____	

SCREEN-PERFORATED INTERVALS: From ... 13.8 ft. to ... 8.8 ft., From ... ft. to ... ft.

GRAVEL PACK INTERVALS: From ... 14.8 ft. to ... 6.0 ft., From ... ft. to ... ft.

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

Grout Intervals: From ... 5.0 ft. to ... 0.0 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	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	<u>16 Other</u> (specify below)
			13 Insecticide storage	<u>Chemical Storage</u>

Direction from well? Northwest How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0.0	1.0	Brown Clayey Silt, Trace Sand			
1.0	7.0	Brown Silty Clay			
7.0	14.0	Red Brown Clayey Silt			
14.0	16.5	Brown Silty Shale With Siltstone Layers			

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) ... 4/27/83 ... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ... 416A ... This Water Well Record was completed on (mo/day/yr) ... 5/18/83 ... under the business name of Terracon Consultants inc 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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY
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R
23
EW
SEC.
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1/2
SW 1/4 NW 1/4