

1 LOCATION OF WATER WELL: County: <b>Gove</b>	Fraction <b>NW ¼ NW ¼ NW ¼</b>	Section Number <b>32</b>	Township Number T <b>11</b> S	Range Number R <b>26</b> <b>EW</b>
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Distance and direction from nearest town or city street address of well if located within city?

**I-70 and Hwy K212 - Quinter, Kansas**

2 WATER WELL OWNER: **Jim Graham**  
 RR#, St. Address, Box # : **P.O. Box 398**  
 City, State, ZIP Code : **Quinter, Kansas 67752**  
 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 . . . . . **94** . . . . . ft. ELEVATION: . . . . . **2659.62**

Depth(s) Groundwater Encountered 1. . . . . **999** . . . . . ft. 2. . . . . ft. 3. . . . . ft.

WELL'S STATIC WATER LEVEL . . . . . **999** . . . . . ft. below land surface measured on mo/day/yr

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

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

Bore Hole Diameter . . . . . **8** . . . . . in. to . . . . . **9.5** . . . . . 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 9 Dewatering **12 Other (Specify below)**  
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well **Air Sparging Well**

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:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued . . . . . Clamped . . . . .
<b>2 PVC</b>	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded . . . . .
		7 Fiberglass		Threaded. <input checked="" type="checkbox"/>

Blank casing diameter . . . . . **2** . . . . . in. to . . . . . **9.2** . . . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.

Casing height above land surface . . . . . **-5.64** . . . . . in., weight . . . . . lbs./ft. Wall thickness or gauge No. . . . . **Sch. 40**

TYPE OF SCREEN OR PERFORATION MATERIAL

1 Steel	3 Stainless steel	5 Fiberglass	<b>7 PVC</b>	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:

1 Continuous slot	<b>3 Mill slot</b>	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 . . . . . **92** . . . . . ft. to . . . . . **94** . . . . . ft., From . . . . . ft. to . . . . . ft.

GRAVEL PACK INTERVALS: From . . . . . **91** . . . . . ft. to . . . . . **94** . . . . . ft., From . . . . . ft. to . . . . . ft.

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

Grout Intervals: From . . . . . **0** . . . . . ft. to . . . . . **76** . . . . . ft., From . . . . . **76** . . . . . ft. to . . . . . **91** . . . . . 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	<b>16 Other (specify below)</b>
			13 Insecticide storage	<b>UST Basin</b>

Direction from well? **N/NE** How many feet? **103**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.5	Asphalt,			
0.5	3.5	Clay, Dark Brown			
3.5	10	Silt, Light Brown			
10	18	Clay, Light Brown			
18	28	Clay, Brown			
28	32	Sand, Red Brown			
32	40	Sand, Red Brown			
40	75	Sand, Red Brown			
75	95	Sand, Gray to Buff			
					ASP10 , Tag # 00175119 , Flushmount
					Project Name: Graham 66 Service
					GeoCore # 288 , KDHE # U6 032 513

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) . . . . . **1/6/97** . . . . . and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. . . . . **527** . . . . . This Water Well Record was completed on (mo/day/yr) . . . . . **2/4/97** . . . . . under the business name of **GeoCore Services, Inc.** by (signature) *Joe Apple*