

1 LOCATION OF WATER WELL: County: Gove	Fraction NW ¼ NW ¼ NW ¼	Section Number 32	Township Number T 11 S	Range Number R 26 EW
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Distance and direction from nearest town or city street address of well if located within city?
Interstate 70 & Highway 212; Quinter, Kansas

2 WATER WELL OWNER: **Graham 66 Service**
 RR#, St. Address, Box # : **P.O. Box 386**
 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: N W E S 1 Mile	4 DEPTH OF COMPLETED WELL 90 ft. ELEVATION: 2660.32 Depth(s) Groundwater Encountered 1. 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 NA ft. after hours pumping gpm Est. Yield NA gpm: Well water was ft. after hours pumping gpm Bore Hole Diameter 8 in. to 90 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 Was a chemical/bacteriological sample submitted to Department? Yes..... No... <input checked="" type="checkbox"/> ...; If yes, mo/day/yr sample submitted Water Well Disinfected? Yes No <input checked="" type="checkbox"/>
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5 TYPE OF BLANK CASING USED:
 1 Steel 2 **PVC** 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)
 Blank casing diameter **2** in. to **60** ft. Dia in. to ft. Dia in. to ft.
 Casing height above land surface **-5.76** in. weight lbs./ft. Wall thickness or gauge No. **Sch 40**
 TYPE OF SCREEN OR PERFORATION MATERIAL
 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 **PVC** 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 2 Louvered shutter 3 **Mill slot** 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) 11 None (open hole)
 SCREEN-PERFORATED INTERVALS: From **60** ft. to **90** ft., From ft. to ft., From ft. to ft.
 GRAVEL PACK INTERVALS: From **55** ft. to **90** 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 **52.5** ft., From **52.5** ft. to **55** ft., From ft. to ft.
 What is the nearest source of possible contamination:
 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 **Other (specify below)**
Underground Storage.
 Direction from well? **September** How many feet? **28**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.06	Gravel,	60	65	Sand, Orange Brown
0.06	2	Topsoil,	65	70.5	Sand, Orange Brown
2	5	Silt, Light Brown	70.5	75	Sand, Dark Brown Orange
5	10	Silt, Light Brown	75	80	Sand, Brown Orange
10	15	Silt, Brown	80	85	Sand, Brown Orange
15	20	Silt, Dark Chocolate Brown	85	90	Sand, Brown Orange
20	26	Silt, Brown to Light Brown			
26	30	Sand, Brown			
30	35	Sand, Brown			
35	40	Sand, Brown			
40	46.5	Sand, Brown			
46.5	50	Sand, Orange Brown			
50	51	Sand, Orange Brown			MW21 , Tag # 00345055 , Flushmount
51	55	Silt, Brown			Project Name: Graham 66 Service-Graham Contact
55	60	Sand, Orange Brown			GeoCore # 794 , KDHE # U6 032 00513

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) **2/1/02** 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) **2/28/02**
 under the business name of **GeoCore Services, Inc.** by (signature) *Dale Kell*

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.