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|---------------------------|--------------------------------|--------------------------|-------------------------------|-----------------------------|
| 1 LOCATION OF WATER WELL: | Fraction NW ¼ NW ¼ NW ¼ | Section Number 32 | Township Number T 11 S | Range Number R 26 EW |
|---------------------------|--------------------------------|--------------------------|-------------------------------|-----------------------------|

Distance and direction from nearest town or city street address of well if located within city?
Junction of Castle Rock Road & Kansas Hwy 212, Quinter, Kansas

2 WATER WELL OWNER: **Grahams 66**
 RR#, St. Address, Box # : **Interstate 70 & Castle Rock Road**
 City, State, ZIP Code : **Quinter, KS 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 **89.5** ft. ELEVATION: **2659**

Depth(s) Groundwater Encountered 1 **74.80** ft. 2 ft. 3 ft.

WELL'S STATIC WATER LEVEL **74.80** ft. below land surface measured on mo/day/yr **06-12-2006**

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

Est. Yield **.5** 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 |
| 2 Irrigation | 4 Industrial | 7 Domestic (lawn & garden) |

10 Monitoring well **OZ-2** 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:

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

Blank casing diameter **2** in. to **89.5** ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface **0.2 below** in., weight **0.70** lbs./ft. Wall thickness or gauge No. **sch 40**

TYPE OF SCREEN OR PERFORATION MATERIAL:

| | | | | |
|---------|--------------------|-----------------|---|--------------------------|
| 1 Steel | 3 Stainless Steel | 5 Fiberglass | <input checked="" type="checkbox"/> 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:

| | | | | |
|--------------------|---|------------------|--------------------------|---------------------|
| 1 Continuous slot | <input checked="" type="checkbox"/> 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 **87.3** ft. to **89.5** ft., From ft. to ft.

GRAVEL PACK INTERVALS: From **83.1** ft. to **89.5** ft., From ft. to ft.

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

Grout intervals: From **84.2** ft. to **2** ft., From **2** ft. to **0 concrete** ft., From ft. to ft.

What is the nearest source of possible contamination:

| | | | | |
|--------------------------|-----------------|-----------------|---|--------------------------|
| 1 Septic tank | 4 Lateral lines | 7 Pit privy | <input checked="" type="checkbox"/> 11 Fuel storage | 14 Abandoned water well |
| 2 Sewer lines | 5 Cess pool | 8 Sewage lagoon | 12 Fertilizer storage | 15 Oil well/Gas well |
| 3 Watertight sewer lines | 6 Seepage pit | 9 Feedyard | 13 Insecticide storage | 16 Other (specify below) |

Direction from well? **East**
 How many feet? **150**

| FROM | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|------|------|------------------|------|----|--------------------|
| 0 | 1 | topsoil and fill | | | |
| 1 | 22 | Silt | | | |
| 22 | 40 | Sand | | | |
| 40 | 46 | Silt clayey silt | | | |
| 46 | 89.5 | Sand | | | |
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **06-12-06** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No **554**. This Water Well Record was completed on (mo/day/yr) **07-18-06** under the business name of **Woofter Pump & Well, 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 two 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.