

Corrected Copy

1 LOCATION OF WATER WELL: County: Ellis Fraction: NE 1/4 SW 1/4 NE 1/4 Section Number: 23 Township Number: T 12 S Range Number: R 18 E/W

2 WATER WELL OWNER: Don Forssberg  
 RR#, St. Address, Box #: 2701 Thunderbird  
 City, State, ZIP Code: Hays, KS 67601  
 Board of Agriculture, Division of Water Resources  
 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N	
S	

4 DEPTH OF COMPLETED WELL: 55' ft. ELEVATION: ..... ft.  
 Depth(s) Groundwater Encountered: 1 34' ft. 2 ..... ft. 3 ..... ft.  
 WELL'S STATIC WATER LEVEL: 34' ft. below land surface measured on mo/day/yr 6-6-04  
 Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield 40 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  
 Was a chemical/bacteriological sample submitted to Department? Yes ..... No .....; If yes, mo/day/yrs 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 X Clamped .....  
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded .....  
 7 Fiberglass Threaded .....  
 Blank casing diameter 5' in. to 55 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface 15' in., weight 160 lbs./ft. Wall thickness or gauge No. SDR 26  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 10 Asbestos-Cement  
 2 Brass 4 Galvanized Steel 6 Concrete tile 9 ABS 11 Other (Specify) .....  
 12 None used (open hole)  
 SCREEN OR PERFORATION OPENINGS ARE:  
 1 Continuous slot 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) ..... ft.  
 SCREEN-PERFORATED INTERVALS: From 55 ft. to 35 ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From 55 ft. to 30 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 25 ft. to 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 16 Other (specify below)  
 13 Insecticide storage .....  
 Direction from well? 75' west How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Top soil			
2	30	Clay			
30	45	Clay + sand			
45	52	Sand			
52	55	Shale			

RECEIVED  
 JUN 24 2004  
 BUREAU OF WATER

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) 6-6-04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 478 This Water Well Record was completed on (mo/day/yr) 6-8-04 under the business name of Phannenschil Water Well 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 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. Fee of \$5.00 for each constructed well.