

1 LOCATION OF WATER WELL: County: Ellis Fraction: SW 1/4 SW 1/4 SE 1/4 Section Number: 33 Township Number: T 13 S Range Number: R 18 W

Distance and direction from nearest town or city street address of well if located within city?
404 E 14th - Hays, Kansas

2 WATER WELL OWNER: Bruce Engel
 RR#, St. Address, Box #: 404 E 14th Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Hays, KS 67601 Application Number:

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

4 DEPTH OF COMPLETED WELL: 60 ft. ELEVATION: _____ ft.

Depth(s) Groundwater Encountered: 1 20 ft. 2 42 ft. 3 _____ ft.

WELL'S STATIC WATER LEVEL: 30 ft. below land surface measured on 10/4/04 mo/day/yr

Pump test data: Well water was 30 ft. after 2 hours pumping 10 gpm

Est. Yield: 10 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

WELL WATER TO BE USED AS: 7 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 X; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes X No _____

5 TYPE OF BLANK CASING USED: 2 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped _____
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
 2 PVC 4 ABS 7 Fiberglass _____ Threaded _____

Blank casing diameter: 5 in. to 40 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Dia _____

Casing height above land surface: 24 in., weight: 2.91 lbs./ft. Wall thickness or gauge No. .21

TYPE OF SCREEN OR PERFORATION MATERIAL: 7 7 PVC 10 Asbestos-Cement
 1 Steel 3 Stainless Steel 5 Fiberglass 8 RMP (SR) 11 Other (Specify) _____
 2 Brass 4 Galvanized Steel 6 Concrete tile 9 ABS 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 8 5 Guazed wrapped 8 Saw cut 11 None (open hole)
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____

SCREEN-PERFORATED INTERVALS: From 40 ft. to 60 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 60 ft. to 20 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 3 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From 0 ft. to 20 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? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	20	Topsoil and clay			
20	35	Sand			
35	42	Clay			
42	50	Sand			
50	60	Shale			

RECEIVED
 OCT 22 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) 10/5/04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 199 This Water Well Record was completed on (mo/day/yr) 10/20/04 under the business name of Karst Water Well Drilling & Service, Inc. by (signature) Mel Karst

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.