

MW4

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Ellis</u>		<u>NW 1/4 SW 1/4 NW 1/4</u>	<u>34</u>	T <u>13</u> S	R <u>18</u> EW
Distance and direction from nearest town or city street address of well if located within city? <u>parking lot at Centennial Lanes - 2400 Vine in Hays, KS (near front door)</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box #:		Application Number:			
City, State, ZIP Code:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>72 *</u> ft. ELEVATION: <u>2028.56</u> 1st			
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL <u>44.6</u> ft. below land surface measured on mo/day/yr <u>8/16/94</u>			
		Pump test data: Well water was ft. after hours pumping gpm			
		Est. Yield gpm Well water was ft. after hours pumping gpm			
		Bore Hole Diameter <u>8</u> in. to <u>77.2</u> ft. and <u>2</u> in. to <u>78</u> 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 <u>10 Monitoring well</u>			
		Was a chemical/bacteriological sample submitted to Department? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, mo/day/yr sample was submitted <u>8/19/94</u>			
		Water Well Disinfected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued Clamped			
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded					
2 PVC 4 ABS 7 Fiberglass Threaded <input checked="" type="checkbox"/>					
Blank casing diameter <u>2</u> in. to <u>52</u> ft. Dia. in. to ft. Dia. in. to ft.					
Casing height <u>below</u> land surface <u>0.77</u> ft. weight lbs./ft. Wall thickness or gauge No. <u>Sch 40</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:		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:		5 Gauzed 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 <u>52</u> ft. to <u>72</u> ft. From ft. to ft.					
GRAVEL PACK INTERVALS: From <u>48.7</u> ft. to <u>72</u> ft. From ft. to ft.					
6 GROUT MATERIAL:		4 Other			
1 Neat cement 2 Cement grout 3 Bentonite					
Grout Intervals: From <u>42.4</u> ft. to <u>48.7</u> ft. From <u>42.4</u> ft. to <u>1.1</u> ft. From ft. to ft.					
What is the nearest source of possible contamination:		10 Livestock pens 14 Abandoned water well			
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well					
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)					
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage <u>VOCs detected in ground water</u>					
Direction from well?		How many feet? <u>70</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.5	reinforced concrete	76.5	78	blk shale
0.5	7	dk brn silt loam, dry			
7	12	brn to orange-brn clayey silt, trace sd, slightly damp to dry			KDHE MW4
12	21	orange-brn silty clay, trace sd, to brn clayey silt, silty sdy			KS site ID# 00127950
21	31	dk brn silty clay, damp			Completed at surface w/cap and water-tight, lockable manhole cover.
31	33.5	sd clay, silty			Variances granted, see attached
33.5	45	brn clayey silt, slightly sdy			
45	55.5	brn sdy silt, slightly clayey, trace ls granules			
55.5	73.5	sd, some clay			* A shallower total depth of 62 ft in the completed well is believed to be the result of damage to the screen during its installation.
73.5	74	lt. grey-green to lt. blue-green sdy clay			
74	76.5	v. dk grey to blk clay, dense, w/ thin sdy zones			
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) <u>8/15/94</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/yr) <u>8/31/94</u> under the business name of <u>KS. Dept. Health & Environment</u> by (signature) <u>Jamela X. Chaffee</u>					
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.					