

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <b>Ellis</b>		<b>SE ¼ SE ¼ NE ¼</b>	<b>8</b>	<b>T 13 S</b>	<b>R 20 E</b>
Distance and direction from nearest town or city street address of well if located within city? <b>1000 Monroe, Ellis, Kansas</b>					
2 WATER WELL OWNER: <b>Golden Belt Cooperative</b>					
RR#, St. Address, Box # : <b>P.O. Box 138</b>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <b>Ellis, Kansas 67637</b>			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <b>25.0</b> ft. ELEVATION: _____			
		Depth(s) Groundwater Encountered 1 <b>18.0</b> ft. 2 _____ ft. 3 _____ ft.			
		WELL'S STATIC WATER LEVEL <b>15.70</b> ft. below land surface measured on mo/day/yr <b>04/07/07</b>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <b>NA</b> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <b>8.5</b> in. to <b>25.0</b> ft. and _____ in. to _____ ft.			
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well			
		1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering ② Other (Specify below)			
		2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well <b>Remedial Test Well</b>			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b> If yes, mo/day/yr sample was submitted _____			
		Water Well Disinfected? Yes _____ No <b>X</b>			
5 TYPE OF BLANK CASING USED:					
① Steel		3 RMP (SR)		5 Wrought Iron	
② PVC		4 ABS		8 Concrete tile	
		7 Fiberglass		CASING JOINTS: Glued _____ Clamped _____	
Blank casing diameter <b>2.375</b> in. to <b>10.0</b> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.				Welded _____ Threaded <b>X</b>	
Casing height above land surface <b>Flush Mount</b> in., weight _____ lbs./ft. Wall thickness or gauge No. <b>Schedule 40</b>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		⑦ PVC	
2 Brass		4 Galvanized steel		8 RMP (SR)	
		5 Fiberglass		10 Asbestos-cement	
		6 Concrete tile		9 ABS	
				11 Other (specify) _____	
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		③ Mill slot		5 Gauzed wrapped	
2 Louvered shutter		4 Key punched		6 Wire wrapped	
				8 Saw cut	
				9 Drilled holes	
				10 Other (specify) _____	
SCREEN-PERFORATED INTERVALS: From <b>25.0</b> ft. to <b>10.0</b> ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <b>25.0</b> ft. to <b>8.0</b> ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement ② Cement grout ③ Bentonite 4 Other _____					
Grout Intervals From <b>0.0</b> ft. to <b>0.5</b> ft. From <b>0.5</b> ft. to <b>8.0</b> ft. From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
1 Septic tank		4 Lateral lines		⑩ Livestock pens	
2 Sewer lines		5 Cess pool		⑪ Fuel storage	
3 Watertight sewer lines		6 Seepage pit		12 Fertilizer storage	
		7 Pit privy		13 Insecticide storage	
		8 Sewage lagoon		14 Abandoned water well	
		9 Feedyard		15 Oil well/ Gas well	
				16 Other (specify below) _____	
Direction from well? <b>North</b>		How many feet? <b>30</b>			
FROM	TO	CODE	LITHOLOGIC LOG		
<b>0.0</b>	<b>5.0</b>		<b>Black clayey silty, dry</b>		
<b>5.0</b>	<b>18.0</b>		<b>Brown silt, slightly clayey, dry</b>		
<b>18.0</b>	<b>25.0</b>		<b>Light brown-gray clay, slightly plastic, wet</b>		
<b>Exception to K.A.R. 28-30-6(b) (1) and (e) approved by D. Taylor, KDHE-BOW.</b>					
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/yr) <b>04/04/07</b> and this record is true to the best of my knowledge and belief, Kansas					
Water Well Contractor's License No. <b>692</b>			This Water Well Record was completed on (mo/day/yr) <b>05/25/07</b>		
under the business name of <b>Quad State Services, Inc.</b>			by (signature)		
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S.W. Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

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