

1 LOCATION OF WATER WELL: County: RUSSELL Fraction: SW 1/4 NE 1/4 SW 1/4 Section Number: 31 Township Number: T 15 S Range Number: R 13 EW

Distance and direction from nearest town or city street address of well if located within city? MS-3

2 WATER WELL OWNER: K&W Pipeline Co. RR#, St. Address, Box #: P.O. Box 711 City, State, ZIP Code: RUSSELL, KANSAS

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: 18.5 ft. ELEVATION: _____ ft.

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

WELL'S STATIC WATER LEVEL: 11.79 ft. below land surface measured on mo/day/yr _____

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: 8 in. to 18.5 ft. and _____ in. to _____ 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 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes _____ No X; If yes, mo/day/yr sample was sub-
mitted _____ Water Well Disinfected? Yes _____ No X

5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____

2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ Threaded X

7 Fiberglass

Blank casing diameter _____ in. to 8.33 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.

Casing height above land surface: 3.17 ft. weight .69 lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 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) _____

SCREEN-PERFORATED INTERVALS: From 8.33 ft. to 18.43 ft. From _____ ft. to _____ ft.

From _____ ft. to _____ ft. From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 6 ft. to 18.5 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 0 ft. to 6 ft. From _____ ft. to _____ 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

Direction from well? near pipelines How many feet? _____

FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS

0 1 Soil - Clay _____ _____

1 3 Clay - brn, gray _____ _____

3 18.5 Gravelly clay _____ _____

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) 3-25-97 and this record is true to the best of my knowledge and belief, Kansas

Water Well Contractor's License No. 581 This Water Well Record was completed on (mo/day/yr) 3-26-97

under the business name of Layne Western by (signature) Steve Mitchell

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.