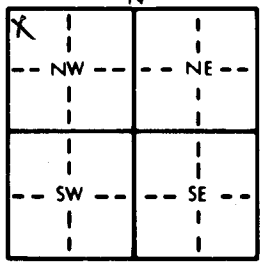


1 LOCATION OF WATER WELL: County: Ellis Fraction: NW 1/4 NW 1/4 NW 1/4 Section Number: 36 Township Number: T 15 S Range Number: R 18 EW

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

2 WATER WELL OWNER: City of Hays  
 RR#, St. Address, Box #: 1002 Vine Street Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Hays, KS 67601 Application Number: N/A

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  
  
 4 DEPTH OF COMPLETED WELL: 54.30 ft. ELEVATION:  
 Depth(s) Groundwater Encountered 1. \_\_\_\_\_ ft. 2. TOP OF CASING ft. 3. \_\_\_\_\_ ft.  
 WELL'S STATIC WATER LEVEL: 12.12 ft. below land surface measured on 11/14/04  
 Pump test data: Well water was \_\_\_\_\_ ft. after 3 hours pumping 3.5 gpm  
 Est. Yield \_\_\_\_\_ gpm; Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm  
 Bore Hole Diameter: 6.74 in. to 54.5 in. and \_\_\_\_\_ in. to \_\_\_\_\_ in. 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 submitted  
 Water Well Disinfected? Yes X No 3

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 \_\_\_\_\_  
 7 Fiberglass \_\_\_\_\_ Threaded \_\_\_\_\_  
 Blank casing diameter 2 in. to 34 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface 2.8 in., weight \_\_\_\_\_ lbs./ft. Wall thickness or gauge No. sch 40  
 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 8 RMP (SR) 11 Other (specify) \_\_\_\_\_  
 9 ABS 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 54.0 ft. to 34.0 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 GRAVEL PACK INTERVALS: From 54.0 ft. to 20 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 20 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)  
Smoky Hill River  
 Direction from well? 100' North  
 How many feet? \_\_\_\_\_

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Sandy topsoil			
1	3	Brown clay			
3	8	very fine sand			
8	15	med to coarse sand w/gravel			
15	20	med. to coarse w/gravel trace clay			
20	31	coarse to med. sand w/fines			
31	34	same with clay + cobble			
34	42	Med. to coarse sand w/gravel + fines			
42	43	Med to fine sand w/clay			
43	44	Grey Clay			
44	49	Med. to coarse w/gravel + fines			
49	50	boulder trace clay			
50	54.5	Med to coarse w/fines			
54.5		Grey Shale			

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) 1/14/04 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) 1/19/04 under the business name of Layne Christensen by (signature) Russell W Redding

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.

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