

1 LOCATION OF WATER WELL: County: <u>Ellsworth</u>		Fraction <u>SW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$	Section Number <u>31</u>	Township Number T <u>17</u> S	Range Number R <u>9</u> W
Distance and direction from nearest town or city street address of well if located within city? <u>west of plant</u> <u>OB-19FF</u>					
2 WATER WELL OWNER: <u>ENRON</u> RR#, St. Address, Box # : City, State, ZIP Code : <u>BUSHTON, KS</u> 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: <u>30</u> ft. ELEVATION:			
1 Mile scale bar.		Depth(s) Groundwater Encountered 1. .ft. 2. .ft. 3. .ft.			
		WELL'S STATIC WATER LEVEL <u>17</u> 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 <u>8</u> in. to <u>32</u> ft., and .in. to .ft.			
		WELL WATER TO BE USED AS: 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 <u>X</u> ; If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes No <u>X</u>			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		CASING JOINTS: Glued . Clamped .	
2 PVC		4 ABS		Welded . Threaded <u>X</u>	
Blank casing diameter . in. to . ft., Dia . in. to . ft., Dia . in. to . ft.					
Casing height above land surface . in., weight . lbs./ft. Wall thickness or gauge No. .					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		6 Concrete tile	
				8 RMP (SR)	
				9 ABS	
				12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		3 Mill slot		8 Saw cut	
2 Louvered shutter		4 Key punched		9 Drilled holes	
				10 Other (specify)	
SCREEN-PERFORATED INTERVALS:					
From . ft. to . ft.		From . ft. to . ft.		From . ft. to . ft.	
From . ft. to . ft.		From . ft. to . ft.		From . ft. to . ft.	
GRAVEL PACK INTERVALS:					
From . ft. to . ft.		From . ft. to . ft.		From . ft. to . ft.	
From . ft. to . ft.		From . ft. to . ft.		From . ft. to . ft.	
6 GROUT MATERIAL:					
1 Neat cement		3 Cement grout		4 Other	
Grout Intervals: From . ft. to . 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	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
				10 Livestock pens	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/Gas well	
				16 Other (specify below)	
Direction from well?		How many feet?			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
17	17	Clay			
17	30	Sandy 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) <u>1-29-94</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>581</u> This Water Well Record was completed on (mo/day/year) <u>8-1-94</u> under the business name of <u>Layne, Inc</u> by (signature) <u>Jesse R. Mitchell</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.					