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|---|-----------|--|---|-------------------------------|--|
| 1 LOCATION OF WATER WELL: | | Fraction | Section Number | Township Number | Range Number |
| County: Rush | | SW ¼ SW ¼ SE ¼ | 20 | T 18 S | R 20 W |
| Distance and direction from nearest town or city street address of well if located within city? K-96 Hwy and Whippet Ave. - Alexander | | | | | |
| 2 WATER WELL OWNER: Mid-State Farmers Coop | | | | | |
| RR#, St. Address, Box # : PO Box 195 | | | Board of Agriculture, Division of Water Resources | | |
| City, State, ZIP Code : Rush Center, KS 67575 | | | Application Number: | | |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | | 4 DEPTH OF COMPLETED WELL 42 ft. ELEVATION: 2079.11 (TOC) | | | |
| | | Depth(s) Groundwater Encountered 1 32 ft. 2 _____ ft. 3 _____ ft. | | | |
| | | WELL'S STATIC WATER LEVEL 32.95 ft. below TOC measured on mo/day/yr 12/03/14 | | | |
| | | 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 42 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 12 Other (Specify below) | | | |
| | | 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 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 _____ 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 _____ |
| | | | 7 Fiberglass | | Threaded Flush |
| Blank casing diameter 2 in. to 27 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. | | | | | |
| Casing height above land surface 0 in., weight 0.703 lbs./ft. Wall thickness or gauge No. SCH. 40 | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | |
| 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: | | | | | |
| 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 27 ft. to 42 ft. From _____ ft. to _____ ft. | | | | | |
| GRAVEL PACK INTERVALS: From 25 ft. to 42 ft. From _____ ft. to _____ ft. | | | | | |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____ | | | | | |
| Grout Intervals From 1 ft. to 25 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) |
| | | | | 13 Insecticide storage | |
| Direction from well? _____ How many feet? _____ | | | | | |
| FROM | TO | CODE | LITHOLOGIC LOG | FROM | TO |
| 0 | 10 | | Clayey Silt, dark brown to brown, trace white streaks & fine sand below 5' | | |
| 10 | 20 | | Silt, light brown to brown, with trace fine sand | | |
| 20 | 28 | | Silty Clay, brown and dark brown to pale brown | | |
| 28 | 32 | | Clayey Sand, fine to medium grained, trace coarse sand and gravel | | |
| 32 | 42 | | Gravelly Sand, fine to coarse grained, with cobbles | | |
| | | | | GPS: (WGS84) | |
| | | | | Latitude: N 38.467043 | |
| | | | | Longitude: W 99.556675 | |
| 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) 12/03/14 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 12/17/14 under the business name of GSI Engineering, LLC by (signature) <i>[Signature]</i> | | | | | |
| INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 SW 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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