

<b>1 LOCATION OF WATER WELL:</b>		Fraction		Section Number		Township Number		Range Number																															
County: <u>Wichita</u>		SW 1/4 NE 1/4 NW 1/4		24		T 18 S		R 37 E <u>(W)</u>																															
Distance and direction from nearest town or city street address of well if located within city?																																							
<u>1st and N Streets in Leoti.</u>																																							
<b>2 WATER WELL OWNER:</b> <u>City of Leoti</u>																																							
RR#, St. Address, Box # :																																							
City, State, ZIP Code : <u>Leoti, KS 67861</u>																																							
Board of Agriculture, Division of Water Resources Application Number: <u>20,106</u>																																							
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>		<b>4 DEPTH OF COMPLETED WELL:</b> <u>170</u> ft. ELEVATION: .....																																					
<div style="text-align: center;"><p>1 Mile</p></div>		Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.																																					
		WELL'S STATIC WATER LEVEL <u>121</u> ft. below land surface measured on mo/day/yr <u>3-25-86</u>																																					
		Pump test data: Well water was <u>131</u> ft. after <u>6</u> hours pumping <u>100</u> gpm																																					
		Est. Yield <u>100</u> gpm: Well water was .... ft. after .... hours pumping .... gpm																																					
		Bore Hole Diameter <u>15</u> in. to <u>170</u> 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 Observation 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 <u>X</u> No																																					
		<b>5 TYPE OF BLANK CASING USED:</b>																																					
		1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <u>X</u> Clamped .....																																					
		2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded .....																																					
		Blank casing diameter <u>8</u> in. to <u>170</u> ft., Dia. .... in. to .... ft., Dia. .... in. to .... ft.																																					
		Casing height above land surface <u>12</u> in., weight <u>67</u> lbs./ft. Wall thickness or gauge No. <u>410W</u>																																					
		<b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b>																																					
		1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement																																					
		2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) .....																																					
		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 <u>132</u> ft. to <u>142</u> ft., From .... ft. to .... ft.																																					
		From <u>153</u> ft. to <u>158</u> ft., From .... ft. to .... ft.																																					
		GRAVEL PACK INTERVALS: From .... ft. to .... ft., From .... ft. to .... ft.																																					
		From .... ft. to .... ft., From .... ft. to .... ft.																																					
		<b>6 GROUT MATERIAL:</b> 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....																																					
		Grout Intervals: From <u>7-27</u> ft. to <u>115-120</u> 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 none observed																																					
		Direction from well? How many feet?																																					
		<table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th>FROM</th><th>TO</th><th>LITHOLOGIC LOG</th><th>FROM</th><th>TO</th><th>LITHOLOGIC LOG</th></tr></thead><tbody><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>								FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG																								
		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG																																
		See attached log																																					
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>3-21-86</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>145</u> This Water Well Record was completed on (mo/day/yr) <u>4-18-86</u> under the business name of <u>Henkle Drilling &amp; Supply Co., Inc.</u> by (signature) <u>Bruce J. Henkle</u>																																							
INSTRUCTIONS: Use typewriter or ball point pen, <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.																																							

OFFICE USE ONLY

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## DRILLERS TEST LOG

CUSTOMERS NAME City of Leoti DATE 2-21-86  
STREET ADDRESS \_\_\_\_\_ TEST # 2 E. LOG Yes  
CITY & STATE Leoti, Kansas DRILLER Livingston  
COUNTY Wichita QUARTER NW SECTION 24 TOWNSHIP 18 RANGE 37  
LOCATION 210 ft. North and 100 ft. West from SW corner of fence around tower

[illegible]

GARDEN CITY, KS  
Phone 276-3278

HENKLE DRILLING & SUPPLY CO., INC.  
IRRIGATION HEADQUARTERS

SUBLETTE, KS  
Phone 675-4311

TEST HOLES \* \* \* \* \* IRRIGATION & INDUSTRIAL WELLS \* \* \* \* STOCK WELLS