

1 LOCATION OF WATER WELL: County: <u>Greeley</u>	Fraction <u>SE</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$	Section Number <u>20</u>	Township Number <u>T 18</u> <u>S</u>	Range Number <u>R 40</u> <u>EW</u>
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Distance and direction from nearest town or city street address of well if located within city?

400 W. Lawrence

2 WATER WELL OWNER: <u>USD #200</u>	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box # : <u>400 W. Lawrence</u>	Application Number:
City, State, ZIP Code : <u>Tribune, KS 67879</u>	

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>117</u> ft. ELEVATION:
	Depth(s) Groundwater Encountered 1. <u>102</u> ft. 2. <u>100.3</u> ft. 3. <u>4/12/93</u> ft. WELL'S STATIC WATER LEVEL <u>100.3</u> ft. below land surface measured on mo/day/yr <u>4/12/93</u> Pump test data: Well water was <u>118</u> ft. after <u>117</u> hours pumping <u>117</u> gpm Est. Yield <u>117</u> gpm: Well water was <u>118</u> ft. after <u>117</u> hours pumping <u>117</u> gpm Bore Hole Diameter <u>6.625</u> in. to <u>118</u> ft., and <u>118</u> in. to <u>117</u> 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 <u>10 Monitoring well</u> <u>MW-9</u> Was a chemical/bacteriological sample submitted to Department? Yes <u>No</u> <u>X</u> ; If yes, mo/day/yr sample was submitted <u>117</u> Water Well Disinfected? Yes <u>No</u> <u>X</u>

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>117</u> Clamped <u>117</u>
1 Steel	6 Asbestos-Cement	9 Other (specify below)	Welded <u>117</u>
<u>2 PVC</u>	7 Fiberglass		Threaded <u>X</u>
3 RMP (SR)			
4 ABS			
Blank casing diameter <u>2.0</u> in. to <u>117</u> ft., Dia <u>117</u> in. to <u>117</u> ft., Dia <u>117</u> in. to <u>117</u> ft.			
Casing height above land surface <u>0.0</u> in., weight <u>117</u> lbs./ft. Wall thickness or gauge No. <u>Schd. 40</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:	<u>7 PVC</u>	10 Asbestos-cement	
1 Steel	8 RMP (SR)	11 Other (specify)	
2 Brass	9 ABS	12 None used (open hole)	
3 Stainless steel			
4 Galvanized steel			
6 Concrete tile			
SCREEN OR PERFORATION OPENINGS ARE:	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
1 Continuous slot	6 Wire wrapped	9 Drilled holes	
2 Louvered shutter	7 Torch cut	10 Other (specify)	
3 Mill slot			
4 Key punched			
SCREEN-PERFORATED INTERVALS: From <u>117</u> ft. to <u>97</u> ft., From <u>117</u> ft. to <u>97</u> ft., From <u>117</u> ft. to <u>97</u> ft.			
GRAVEL PACK INTERVALS: From <u>117</u> ft. to <u>95</u> ft., From <u>117</u> ft. to <u>95</u> ft., From <u>117</u> ft. to <u>95</u> ft.			

6 GROUT MATERIAL:	1 Neat cement	<u>2 Cement grout</u>	<u>3 Bentonite</u>	4 Other
Grout intervals: From <u>117</u> ft. to <u>97</u> ft., From <u>117</u> ft. to <u>97</u> ft., From <u>117</u> ft. to <u>97</u> ft.				
What is the nearest source of possible contamination:	1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens
	2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage
	3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage
				13 Insecticide storage
Direction from well?				14 Abandoned water well
				15 Oil well/Gas well
				16 Other (specify below)

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	20	Silty Clay, Brn. Lean	115	118	Clay, Yellow, Fat
20	25	Silty Clay, Brn. Lean, Salmon, Caliche			
25	30	Sand, Rust, Med-Lg. Gr. Caliche			
30	35	Sand, Brn.-Rust, Fn-Lg Gr. Caliche			
35	40	Sand, Rust, Med-Lg Gr. Caliche			
40	45	Sand, Rust, Fn-Lg Gr., Gravel Sm-Lg.			
45	50	Sand, Brn-Gray, Fn-Med, Gr. Caliche			
50	55	Sand, Rust, Fn-Med Gr. Gravel Sm, Caliche			
55	60	Sand, Rust, Fn-Lg Gr. Caliche			
60	65	Sand, Rust, Fn-Med Gr. Caliche			
65	70	Sand, Brn, to Rust, Fn-Lg Gr. Gravel Sm-Med.			
70	90	Sand, Buff-Tan, Med-Lg Gr. Gravel Sm.			
90	100	Sand, Lt. Brn. Sm-Med Gr., Caliche			
100	110	Sand, Rust, Lg-Gr.			
110	115	Sand, Rust, Lg. Gr. Clay, Yellow, Fat			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed</u> (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>2-5-93</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>540</u> This Water Well Record was completed on (mo/day/yr) <u>4-12-93</u> under the business name of <u>Prairie Land Environmental Remediation, Inc</u> (signature) <u>[Signature]</u>
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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.