				WELL RECOR	D Form W							
		TER WELL:	Fraction				n Number	Township		_	Number	
County:			SW 1/4	NW 1/4	NW 1/4		23	_ T 19	S	R 5	E(VV)	
Distance and direction from nearest town or city street address of well if located within city?												
2 1/2 mile W, 3/4 mile N of Conway, E side of road												
2 WATER WELL OWNER: Mid America Pipeline Company												
RR#, St. Address, Box # : 1800 South Baltimore Ave. Board of Agriculture, Division of Water Resources												
City, State, ZIP Code : Tulsa, OK 74119 Application Number:												
3 LOCATE WELL'S LOCATION 4 DEPTH OF COMPLETED WELL 37 # ELEVATION:												
WITH AN A IN SECTION BOX. Depth(s) Groundwater Encountered 1 # 2 # 3												
N Depth(s) Groundwater Encountered 1π. 2												
1 L	1 1 ' 1 ' 1											
X	Pump test data: Well water was											
	and the second s											
₩ W L	1	Bore Hole Diameter 8 in. to										
= "		E WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well										
1	. j		1 Domestic	3 Feedlot	6 Oil field	water s	upply	9 Dewatering	12	Other (Specif	y below)	
	- SW	SE	2 Irrigation	4 Industrial	7 Lawn ai	nd garde	en only (1	Monitoring v	vell,			
1	i	i w	/as a chemical/b	oacteriological s	sample submit	ed to D	epartment	? YesNo	√; If yes,	mo/day/yr sa	ample was	
<u> </u>	'		ubmitted	_				ter Well Disinfe			/	
5 TYPE C		CASING USED:	F	Wrought iron	8.0	oncrete	tile	CASING	IOINTS: Gluer	d Cla	mned	
<u>5</u> 5 1 Ste		3 RMP (SR)		Asbestos-Cer			ecify belov			ed	· .	
(2)PV		4 ABS		7 Fiberglass		٠.	•	•		aded√		
		— –								-	I .	
		· iı										
		and surface . ,		n., weight			lbs./f				1.40	
TYPE OF S	SCREEN O	R PERFORATION M			•	PVC		10 A	Asbestos-cem	ent		
1 Ste	eel	3 Stainless st	eel 5	Fiberglass	8	RMP (SR)	11 (Other (specify)		
2 Bra	ass	4 Galvanized	steel 6	Concrete tile	9	ABS		12 N	lone used (or	en hole)		
SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)												
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes												
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)												
SCREEN-PERFORATED INTERVALS: From												
From												
GRAVEL PACK INTERVALS: From												
From												
6 GROUT MATERIAL: 1 Neat cement (2) Cement grout (3) Bentonite 4 Other												
				ft., From .	i3	. ft. to .						
What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned								bandoned wa	ter well			
1 Septi	ic tank	4 Lateral		ines 7 Pit privy			11 Fuel storage 15			il well/Gas we	الد	
2 Sewe	er lines	5 Cess po	ool 8 Sewage lagoon				12 Fertilizer storage 16 Other (specify I				below)	
3 Wate	ertight sewe	er lines 6 Seepag	pit 9 Feedyard				13 Insecticide storage Unknown					
Direction for	rom well?						How man	ny feet?				
FROM	TO		LITHOLOGIC LO	OG	FRC	М	TO		PLUGGING II	VTERVALS		
0	3.5	Clay, Black			24	ļ	25 S	hale, Gray				
3.5	5	Clay, Yellow Br	rown		25	5	30 S	hale, Gray				
5	7	Clay, Tan Brow	vn		30			hale, Gray				
7	9	Clay, Pale Gray			33			hale, Green				
9		Clay, Brown Yo			34			hale, Red				
						_						
10.5		Shale, Green G			35	-		hale, Red				
11.5		Shale, Green G	ray		3'	<u>'</u>	40 S	hale, Red				
12.5	14	Shale, Gray		***								
14	15	Shale, Yellow B										
15	17	Shale, Yellow B	rown									
17	18.5	Shale, Yellow B										
18.5	20	Shale, Yellow B										
20		Shale, Gray					N	/W10 , Aboveg	rade			
21		Shale, Gray						roject Name: M		-G and M		
22.5 24 Shale, Gray GeoCore # 121, G and M # OK0584.001												
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)												
Kansas Water Well Contractor's License No												
under the business name of GeoCore Services, Inc. by (signature)												
INSTRU	JCTIONS: Us	e typewriter or ball point	pen. PLEASE PRE	SS FIRMLY and P	<i>RINT</i> clearly. Ple	ase fill in	blanks, unde	rline or circle the co	orrect answers.	Send top three co	opies to Kansas	
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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.												