

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Rice	SE 1/4 NE 1/4 NW 1/4	21	T 21 S	R 8 E/W

Distance and direction from nearest town or city street address of well if located within city?
327 N. Broadway

2 WATER WELL OWNER: **Sterling Power Plant**
 RR#, St. Address, Box # : **327 N. Broadway**
 City, State, ZIP Code : **Sterling, KS 67579**
 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 14.66 ft. ELEVATION:
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N
--NW--X--NE--
W E
--SW-- SE--
S

Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft.
 WELL'S STATIC WATER LEVEL **8.68** ft. below land surface measured on mo/day/yr **2-7-05**
 Pump test data: Well water was ft. after hours pumping gpm
 Est. Yield gpm: Well water was ft. after hours pumping gpm
 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 Domestic (lawn & garden) **11** Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes No **XX**; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes No **XX**

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued Clamped
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below) Welded
XX PVC	4 ABS	7 Fiberglass	Threaded XX

Blank casing diameter **2**" in. to **5.1** ft., Dia in. to ft., Dia in. to ft.
 Casing height above land surface **2" below** in., weight lbs./ft. Wall thickness or guage No. **Sch 40**
 TYPE OF SCREEN OR PERFORATION MATERIAL: **XX** RVC 10 Asbestos-Cement
 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 **XX** Mill slot **.010** 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 7 Torch cut 9 Drilled holes 10 Other (specify) ft.

SCREEN-PERFORATED INTERVALS: From ~~15.1~~ **14.66** ft. to **5.1** ft., From ft. to ft.
 From ft. to ft., From ft. to ft.
 GRAVEL PACK INTERVALS: From **15.1** ft. to **4.1** ft., From ft. to ft.
 From ft. to ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout **XX** Bentonite 4 Other

Grout Intervals: From **4.1** ft. to **0** 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 **XX** 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? **Immediate vicinity** How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5'	Dark Sandy Clay			
5'	7'	TAN CLAY			
7'	15'	TAN SAND			

MW # 3

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was **XX** constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **2-7-05** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No **665** This Water Well Record was completed on (mo/day/yr) **2-18-05** under the business name of **Pratt Well Service Environmental** by (signature) *Steven Egell*

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answer. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.