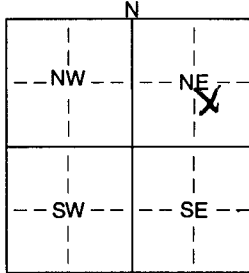


1 LOCATION OF WATER WELL:		FRACTION		TOWNSHIP NUMBER		RANGE NUMBER	
COUNTY: <u>DAWSON</u>		<u>NW 1/4 SE 1/4 NE 1/4</u>		<u>2</u>		<u>T 22 S R 17 E</u>	
DISTANCE AND DIRECTION FROM NEAREST TOWN OR CITY STREET ADDRESS OF WELL IF LOCATED WITHIN CITY? <u>LARNED STATE HOSPITAL</u>							
2 WATER WELL OWNER: <u>LARNED STATE HOSPITAL</u>							
RR#, ST. ADDRESS, BOX # : <u>RT 3 BOX 89</u>				BOARD OF AGRICULTURE, DIVISION OF WATER RESOURCES			
CITY, STATE, ZIP CODE : <u>LARNED, KS</u>				APPLICATION NUMBER:			
3 LOCATE WELL'S LOCATION WITH		4 DEPTH OF COMPLETED WELL: <u>25</u> ft. ELEVATION:					
AN "X" IN SECTION BOX:		DEPTH(S) GROUNDWATER ENCOUNTERED 1. <u>219.5</u> ft. 2. ft. 3. ft.					
		WELL'S STATIC WATER LEVEL <u>20.12</u> ft. below land surface measured on mo/day/yr <u>4/11/00</u>					
		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 <u>8.625</u> in. to <u>25</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 Domestic (lawn & garden) <u>10 Monitoring well</u> <u>AMW-7</u>					
		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 No <u>Y</u>					
5 TYPE OF BLANK CASING USED:							
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) CASING JOINTS: Glued. Clamped. Welded. Threaded. <u>Y</u>							
<u>2</u> PVC 4 ABS 7 Fiberglass							
Blank casing diameter <u>2</u> in. to <u>15</u> ft. Dia. in. to ft. Dia. in. to ft.							
Casing height above land surface <u>Fluon</u> in., weight <u>26.40</u> lbs./ft. Wall thickness or gauge No.							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement							
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) 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) ft.							
SCREEN-PERFORATED INTERVALS: From <u>25</u> ft. to <u>15</u> ft. From ft. to ft.							
From ft. to ft. From ft. to ft.							
GRAVEL PACK INTERVALS: From <u>25</u> ft. to <u>14</u> ft. From ft. to ft.							
From ft. to ft. From ft. to ft.							
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
Grout Intervals: <u>3</u> From <u>14</u> ft. to <u>11</u> ft. From <u>11</u> ft. to <u>0</u> 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 13 Insecticide storage <u>10 Other (specify below)</u> <u>contaminated site</u>							
Direction from well? How many feet?							
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS							
<u>0</u> <u>1</u> <u>gravel sand</u> <u>0</u> <u>1</u>							
<u>1</u> <u>7.5</u> <u>clay w/ silt</u> <u>1</u> <u>7.5</u>							
<u>7.5</u> <u>21</u> <u>silt w/ clay</u> <u>7.5</u> <u>21</u>							
<u>21</u> <u>25</u> <u>silt sand</u> <u>21</u> <u>25</u>							
<u>25</u> <u>TD</u> <u>end of bore hole</u> <u>25</u> <u>TD</u>							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>1</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>4/11/00</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. <u>585</u> This Water Well Record was completed on (mo/day/yr) <u>4/12/00</u> under the business name of <u>AEI</u> by (signature) <u>Adrian ADR</u>							
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 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.							